DOCUMENT RESUME

ED 239 763 PS 014 111

TITLE	Innovations in Protective Services. Final Evaluation Report, September 1, 1982 through August 31, 1983.
INSTITUTION	Texas State Dept. of Human Resources, Austin.
PUB DATE	30 Sep 83
NOTE	159p.; For Annual Report, see PS 014 110.
PUB TYPE	Reports - Evaluative/Feasibility (142)
EDRS PRICE	MF01/PC07 Plus Postage.
DESCRIPTORS	*Child Abuse; Child Advocacy; *Child Neglect; Coordination; Foster Care; Group Guidance; *Health Services; *Innovation; Investigations; *State Programs
IDENTIFIERS	Fair Hearings; Protective Services; *Texas

ABSTRACT

This evaluation report describes programs funded by the Texas Department of Human Resources to develop and implement child abuse and neglect services. Yearly evaluation reports and other related information are included for each of the seven programs funded. In addition to this basic information, the evaluation of the Special Investigative Services Project additionally provides a description of project implementation. Appended to the Impact of Protective Services Project evaluation report are parenting and homemaking assessment instruments, a client assessment instrument, and sample output reports. The evaluation of the Group Services for Child Protective Clients Project includes a group services test and a group leadership rating scale. The yearly evaluation of the Coordinated Approach to Investigations and Information Sharing Project provides a list of pertinent federal statutes and regulations, statements of release-of-information policies of various agencies, summaries of selected legislation enacted by the 68th Texas Legislature, an extensive project bibliography, an outline of pilot test research design, and a statement of proposed model guidelines for investigations of child abuse/neglect perpetrated upon children in 24-hour institutional child care. Unsupplemented yearly evaluation reports are provided from the Project to Study Fair-Hearings Practices in Child Protective Services, the Foster Care Advocate Services Project, and the Waco Center for Youth Liaison Project. (RH)

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Final Evaluation Report

September 1, 1982, through August 31, 1983

INNOVATIONS IN PROTECTIVE SERVICES

September 30, 1983

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Office of Research, Demonstration, and Evaluation
Texas Department of Human Resources

INNOVATIONS IN PROTECTIVE SERVICES

FINAL EVALUATION REPORT

P.L. 93-247 State NCCAN Grant Funds

September 30, 1983

Submitted by

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INTRODUCTION

OVERVIEW OF PROJECTS

As the recipient of the child abuse and neglect state grant funds, the Texas Department of Human Resources (DHR) is responsible for their effective utilization. The purpose of the state grants program is to support the states in developing, strengthening, and carrying out child abuse and neglect prevention and treatment programs. One of the program's priorities is "innovative prevention and treatment programs which hold promise for adding a new dimension of service for abused and neglected children and their families." DHR is using this priority as a guide for distributing the grant funds.

The overall goals of this project are as follows:

1. strengthen permanency planning,

2. expand urban and rural sexual abuse projects,

3. strengthen intake and investigation,

4. strengthen in-home service delivery, and

5. expand the usefulness of information systems.

To promote innovation and cost-efficiency, DHR designed a competitive process for awarding the funds. Six projects were approved through the competitive process; two of the six are researching investigative techniques for alleged abuse/neglect complaints. One additional project serves children in DHR conservatorship who are appointed guardians ad litem to aid in permanency planning. Refer to figure 1 for project locations.

PROJECT FUNDING

Six of the regional projects have some state support either as cash or in-kind contributions, coming primarily from Title XX and Title IV-B funds. As a result, the total effort going into these innovative projects considerably exceeds the amount of state grants through P.L. 93-247.

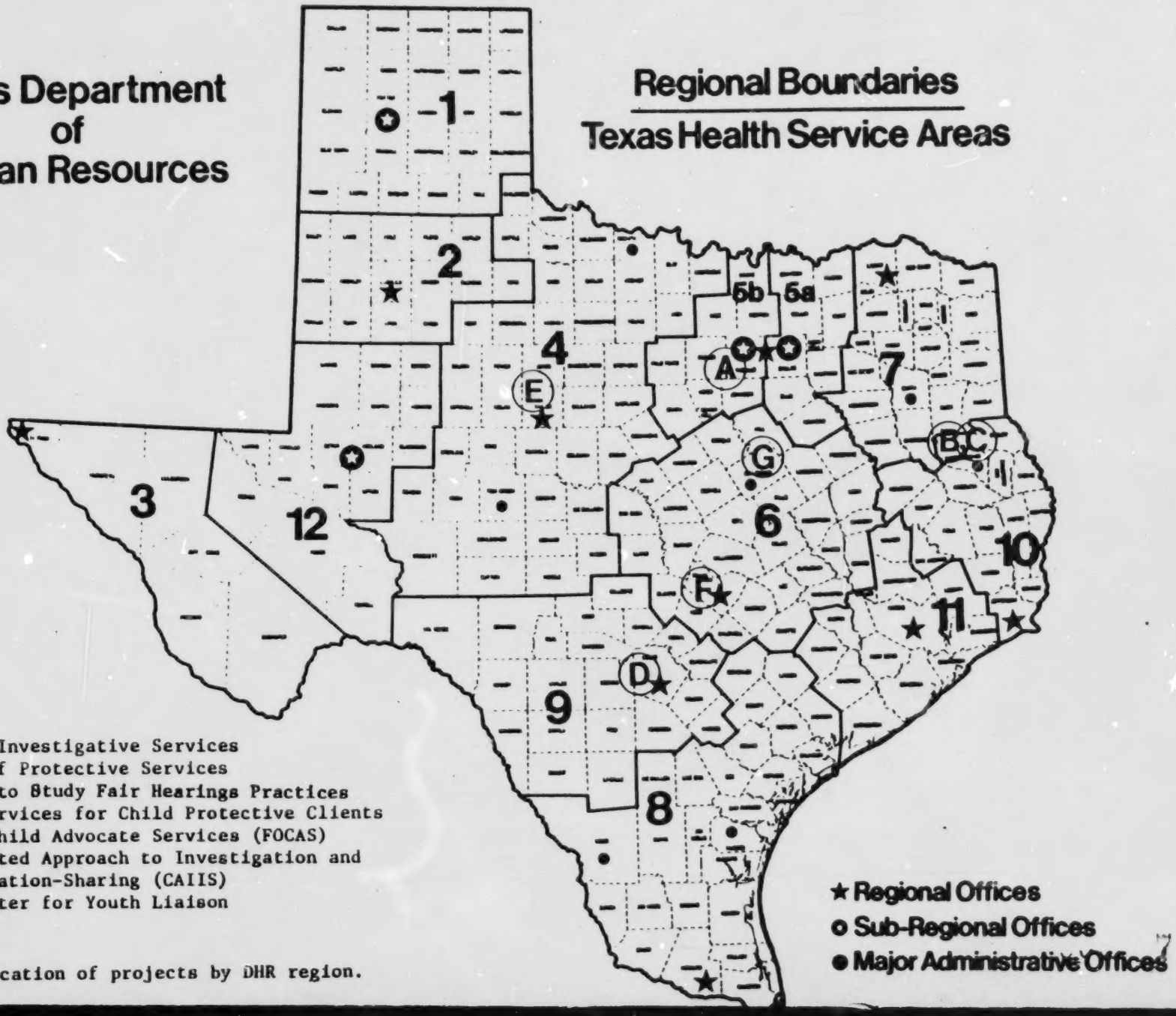

Figure 1. Location of projects by DHR region.

A seventh project funded by the state grant funds has a statewide focus: a liaison function at the Waco Center for Youth, a joint activity of DHR and the Texas Department of Mental health and Mental Retardation. The center predominantly serves children under DHR conservatorship. The liaison function is essential to maintenance of a good working relationship between the agencies; good agency relationships are basic requirements for a sound placement process. In-kind support of the project is also provided by DHR.

Funds are also allocated for administration and evaluation of activities. DHR's Protective Services for Children Branch works with the Office of Research, Demonstration, and Evaluation (ORDE) in carrying out these tasks.

EVALUATIONS

It was considered important to perform an independent evaluation of each project. The evaluations are the responsibility of the Research and Evaluation (R&E) Division. In order to ensure objectivity, R&E is administratively separate from the Protective Services for Children Branch and thus from project administration and management.

Each separate section within this document describes the annual evaluation carried out by the R&E staff. When possible, an impact evaluation was conducted; for other projects, a process evaluation was performed.

1

Special Investigative Services

YEARLY EVALUATION REPORT

EXECUTIVE SUMMARY

The Special Investigative Services Project was established in Tarrant County in DHR's Region 5 to ensure that prosecution decisions were made at the most appropriate level on all child abuse cases involving possible criminal offenses. At this point in the project's life, few significant differences were found between Tarrant County and a control, Travis County. Because of the lengthy nature of judicial proceedings, it is possible that there has not yet been enough time for project effects to manifest themselves. In addition, it is difficult to isolate the effects of the project within the complex judicial system. Process evaluation data regarding the project are highly favorable, as evidenced in the decision by Tarrant County Commissioner's Court to fund project activities effective September 1983, donation of project equipment by the private sector, and the numerous training and community presentations requested of project staff.

BACKGROUND

The Texas Department of Human Resources (DHR) is mandated to investigate all reports of child abuse and neglect. Historically, most child abuse and neglect has been considered a civil matter rather than criminal, and Texas child protective services (CPS) workers have carried full responsibility for investigating the majority of these cases. In 1979, however, Section 22.04 of the Texas Penal Code (injury to a child) was revised to include bodily injury (serious bodily injury to a child was already a criminal offense), and a large segment of cases previously handled in civil court became liable to criminal prosecution. It was clear that DHR needed additional investigative expertise in order to properly obtain and preserve evidence critical to the preparation of sound cases and that most CPS workers were inexperienced in criminal investigative interviewing.

Staff from DHR and the Tarrant County District Attorney's Office wanted to increase the criminal conviction rate of perpetrators of child abuse. It was the consensus of the district attorney's (DA) office and the Child Protective Services Branch (CPSB) of DHR that using certified law enforcement officers, directly supervised by the

district attorney, was the most appropriate method for identifying and pursuing criminal child abuse cases.

In November 1981, Tarrant County CPSB initiated the Special Investigative Services Project, which had been funded under P.L. 93-247. During the project's first year, CPSB and the district attorney's office designed and implemented a cooperative agreement for the disposition of criminal cases of child abuse. (A detailed report on project implementation is provided in Appendix 1-A.) They agreed to hire three certified law enforcement officers for the Tarrant County DA's office to assist CPSB staff and law enforcement officers in Tarrant County in the pursuit of criminal cases of child abuse and to provide help on civil investigations. The investigators also screen new child abuse cases to determine whether criminal prosecution is appropriate.

At the outset of the project, the investigators received an overview of civil law related to physical and sexual child abuse cases and child removal and placement procedures. They continued to receive specialized training during the project's first year. In addition to the three investigators involved in the project, the civil and criminal assistant district attorneys for Tarrant County provide special consultation on, and prosecution of, civil and criminal cases. The project director is the intake supervisor for Tarrant County CPSB; she is responsible for ensuring that all cases are reviewed by the special investigators for possible criminal prosecution.

The first-year evaluation revealed a significant increase in the number of criminal case reviews and investigations of suspected child abuse by the Tarrant County DA's office during a six-month period in 1982 as compared to a similar period in 1981. No significant differences emerged in the number of criminal cases filed in Tarrant County during the project's first year as compared to the previous year. And, probably due to the lengthy nature of judicial proceedings in criminal child abuse cases, no increase was found in the number of criminal cases of suspected child abuse brought to trial during the project's first year as compared to the previous year. During the project's second year, the project's goal was to continue to integrate law enforcement and protective services to protect children and their families.

OBJECTIVES

During the project's second year, the original objectives of increasing the number of criminal cases reviewed, investigated, filed, and brought to trial remained. New objectives were added that focus

on the need to incorporate project efforts into the community structure, help interested counties to replicate the project, and evaluate the effects of police involvement in CPS cases. The project had six objectives for the second year.

- Objective 1: to incorporate the services provided by the project into the existing community structure,
- Objective 2: to increase the number of criminal case reviews/investigations of suspected child abuse by the district attorney's office,
- Objective 3: to increase the number of criminal cases of suspected child abuse filed,
- Objective 4: to increase the number of criminal cases of suspected child abuse brought to trial,
- Objective 5: to determine the effects of police involvement in the investigation of CPS cases, and
- Objective 6: to provide presentations and training on the project model to all requesting regions in the state.

EVALUATION QUESTIONS

The evaluation of the project employed both process and outcome methodologies to assess the extent to which the objectives were successfully met. Outcome measures focused on the extent to which several variables changed, including the number of civil or criminal investigations of child abuse, cases filed, convictions received, and probations granted. Further outcome measures assessed the effect of the project on the number of children removed from their families and the number of foster care placements. Process evaluation addressed whether planned activities were carried out. Six evaluation questions addressed the project objectives.

1. Did the number of civil and criminal investigations of child abuse increase as a function of project activities?
2. Did the number of civil or criminal cases filed, convictions received, and probations granted increase as a result of project activities?

3. Was the incidence of recidivism, the number of children removed from their families, or the number of foster care placements affected by project activities?

4. What was the impact of police involvement in the investigation of CPS cases?

5. Were services provided by the project incorporated into the community structure?

6. Were presentations and training on the project model provided to all regions in the state requesting them?

EVALUATION METHODOLOGY

A pretest/posttest control group design was developed to assess the outcome components of the project evaluation. Travis County was selected as the control county for the project evaluation because of the similarity in demographic characteristics of the two populations and the accessibility of Travis County child abuse data. Data from the project (Tarrant) and control (Travis) counties were examined in six-month or yearly periods of time (depending on the existing formats of summary data gathered), and appropriate statistical analyses were performed. The following variables were examined:

- civil and criminal investigations of child abuse;
- criminal and civil cases filed;
- cases brought before the grand jury;
- cases brought to trial, dismissals, convictions, and convictions resulting in probation;
- recidivism in abuse and neglect cases;
- children removed from their families; and
- children placed in foster care.

Process evaluation was used to determine whether planned activities were carried out within established time frames. Major prob-

lems with completion of project objectives were identified, and resolutions and their effects were noted.

DATA SOURCES

Data regarding case investigations, filings, and dispositions in the project county (Tarrant) were obtained from CPS records and computer data files. In the control county (Travis), data on civil cases were obtained from CPS records, and data on criminal cases were obtained from records in the district attorney's office.

Data sources for the process evaluation consisted of all records, memoranda, and reports of activities prepared by project staff. These sources were made available to evaluation staff on a regular basis by the project director and project compliance coordinator.

RESULTS/STATUS OF OBJECTIVES

Did the number of civil and criminal investigations of child abuse and neglect increase as a function of project activities? For the three six-month intervals between January 1982 and June 1983, the number of civil and criminal investigations in the project county was 1,148, 1,373, and 1,429, compared to 673, 939, and 910 respectively for the control county. When chi-square analysis was performed, no significant difference was found between the project and control counties in the rate of increase in the number of investigations of child abuse.

Did the number of civil or criminal cases filed, convictions received, and probations granted increase as a result of project activities? No significant differences emerged between the project and control counties in the number of civil or criminal cases filed, cases brought before the grand jury, cases brought to trial, dismissals, convictions, and convictions resulting in probation during the time period from July 1981 through June 1983. It should be noted that the complexity of the judicial system and the length of time required to process cases through the court system make these findings very understandable. Child abuse cases often require 18-24 months to achieve final disposition in the judicial process. An additional problem concerns the small number of cases of child abuse in the judicial system; this compounds the difficulty of achieving statistically significant results. (A small number of cases means that absolute differences must be quite sizable if statistical significance is to be reached.) Moreover, the project has attempted to affect a wide range

of variables within a highly complex, interactive system, which includes DHR, the police, the district attorney, the courts, the community, and the media. Early in the project, problems were encountered in coordinating the efforts of DHR staff and the district attorney's staff. Furthermore, the project staff had no control over many other elements in the system that affect the variables examined in the project evaluation. In summary, it is not surprising that statistically significant differences were not found, given the complexity and lengthy nature of the judicial process, the small number of cases involved, and the large number of uncontrolled elements in the complex and interactive system within which the project was operating.

Was the incidence of recidivism, the number of children removed from their families, or the number of foster care placements affected by project activities? Data on the incidence of recidivism were available in the control county but unavailable in the project county; therefore, this variable was not addressed in the evaluation. A significant difference was found between the project and control counties in the number of children removed from their families between July 1981 and June 1983 (see table 1-1). The results in table 1-1 suggest that the number of children removed from their families is increasing at a greater rate in the project county than in the control county.

TABLE 1-1
Children Removed From Families

	July-Dec 1981	Jan-June 1982	July-Dec 1982	Jan-June 1983
Project County	2,129	2,678	3,026	3,157
Control County	1,299	1,370	1,639	1,714

$\underline{X}^2(3)=13.76$, $\underline{p}<.005$

Finally, no significant differences emerged in the data on number of foster care placements in the project and control counties between July 1981 and June 1983.

What was the impact of police involvement in the investigation of CPS cases? The project period did not allow sufficient time to assess accurately the effects of police involvement in the investigation of CPS cases. However, DHR and Texas Christian University were

awarded a grant by the Hogg Foundation on September 27, 1982, for a joint evaluation project, which will assess the effects on sexual abuse victims and their families when law enforcement agencies are involved in CPS cases. The grant period is October 1, 1982, through January 21, 1984. The evaluation will measure both short- and long-term effects of such police involvement. Because of the complexity of the judicial system and the length of time involved in processing cases, no accurate measure of the project's impact could be made at the end of the P.L. 93-247 grant period on August 31, 1983.

Were services provided by the project incorporated into the community structure? The Special Investigative Services Project has been granted continued funding by the Tarrant County Commissioner's Court, effective September 1983. In addition, the special investigators have provided instruction in child abuse investigative techniques on a continuing basis at the Tarrant County Junior College Regional Police Academy. Finally, a local business has donated new video equipment for use by the investigators in interviewing child abuse and sexual abuse victims. Tarrant County judges and attorneys are now allowing videotaped interviews to be used as testimony in grand jury presentations. Videotaping has eliminated the need for victims to repeat their accounts of incidents to several different law enforcement entities and the grand jury, saving victimized children anguish and embarrassment.

Were presentations and training on the project model provided to all regions in the state requesting them? Printed material is now available for dissemination to other regions upon request. Arrangements are being made to present the project processes in workshop format at the statewide annual CPS conference to be held in February 1984. The special investigative staff provided resource information about the project and project implementation to the Galveston (Texas) District Attorney's Office. Members of the special investigative unit served as liaisons to the Texas Department of Public Safety's criminal investigation school in Austin, Texas. County attorneys, district attorneys, and criminal investigators from diversified areas of the state attended the session, which introduced and explained the purposes and activities of the project. Project staff gave a presentation on child abuse investigative techniques to the criminal investigators of the U.S. Army Reserve in Fort Worth, Texas. Finally, community presentations explaining the project and its purposes were given to three parent-teacher organizations in the Tarrant County area. Two civic organizations in Fort Worth have requested presentations.

LIMITATIONS

The major limitation on the evaluation is that the project's schedule precluded sufficient time for project effects to manifest themselves on the variables under examination, particularly variables within the judicial system. In addition, the evaluation was limited due to the difficulty of isolating project effects within the complex interactive system in which the project operated.

APPENDIX 1-A

Description of
Project Implementation

IMPLEMENTATION OF THE SPECIAL INVESTIGATIVE SERVICES PROJECT

INTRODUCTION

In 1979, the Texas Penal Code incorporated bodily injury to a child and serious injury to a child as offenses to come under the jurisdiction of the criminal courts of law. Cases of child abuse and neglect previously pursued only by the Texas Department of Human Resources (DHR) in civil court could now be pursued in criminal courts and prosecuted under criminal statutes. DHR was acutely aware of the necessity for investigative expertise to find and preserve the evidence needed to prepare a sound case and to ensure propriety in obtaining evidence. It was the prevailing opinion that such investigative expertise would increase the number of cases filed in alleged crimes against children. DHR and the Tarrant County District Attorney's Office wanted to increase the chances of obtaining conviction of perpetrators of acts of child abuse and neglect once they were brought to trial. It was the consensus of the district attorney's (DA) office and the Protective Services for Children Division of DHR that the use of certified law enforcement officers under the direct supervision of the district attorney was the most appropriate level for identifying and pursuing cases involving criminal child abuse/neglect offenses.

The Tarrant County District Attorney's Office and the Protective Services for Children Division agreed to test the use of certified law enforcement officers under the supervision of the district attorney's office in the demonstration project entitled Special Investigative Services. The Special Investigative Services Project developed slowly and encountered numerous problems during its implementation and operational phases. Procedural problems and problems centered around establishing and clarifying new roles and responsibilities were among the primary areas of difficulty in getting the project underway. Overall, the project was considered successful and was incorporated into the community structure. The Tarrant County Commissioners Court has agreed to fund three investigators positions after August 31, 1983, when the present grant funding ends.

GOAL

The goal of this project was for the district attorney's office to review all cases appropriate for criminal prosecution through the

use of certified law enforcement officers under the direct supervision of the district attorney's office. This ensured that discretionary prosecution decisions were made at the most appropriate level on all cases involving possible criminal offenses.

The project established five objectives to achieve its goal:

1. to develop and implement a system of criminal case review/investigation by the district attorney's office of suspected child abuse;

2. to increase the number of criminal case reviews/investigations by the district attorney's office of suspected child abuse;

3. to increase the number or criminal cases of suspected child abuse filed;

4. to increase the number of criminal cases of suspected child abuse brought to trial; and

5. to determine the effects of police involvement in the investigation of child protective services cases.

The following portion of this report will outline the methodology used to achieve these objectives and address problems encountered. The resolutions to these problems are also addressed in the report.

IMPLEMENTATION METHODS

Initial Problems

Initial problems of the project centered around organizational structure and chain of command. Understanding on the part of the DA's staff and DHR staff about the role each would assume was lacking in this new partnership. Neither agency understood what the other agency expected of it nor what kinds of interaction was needed to implement this project. This misunderstanding was compounded by the fact that investigators were not initially trained or oriented in the operational aspects of the DHR's protective services unit. The intake process--initial report, assessment, investigation, and disposition--was not explained to the investigators. Child protective services (CPS) workers received no instructions about how they were to inter-

face with the investigators, and no guidelines or processes were established for conducting investigations under the new agreement for either the CPS worker or the investigators.

Fundamental decisions such as the source of supplies, source of equipment, where to go for clerical help, and from whom to seek advice about office problems had not been addressed by project decision makers. The physical location of the investigators prevented immediate access to incoming reports of child abuse and neglect. The investigators were originally officed in a building where there were no intake workers, preventing direct contact with DHR intake workers about child abuse reports as they came into the office.

Clerical assignments were a particular problem. The investigators were assigned to a clerical pool in the building where they were officed, and their work was not assigned a priority status. This caused delays in filing of cases where speed in delivery to the court was important.

There was also the historical problem of philosophical differences regarding effective techniques for handling perpetrators treatment verses prosecution. Historically, CPS workers preferred to counsel perpetrators while they continued to reside in the home. Many felt uneasy in prosecuting offenders because this meant separating families. Law enforcement officials felt prosecution was the preferred way to deal with offenders even if it meant separating families.

As these problems surfaced and were brought to the attention of project decision makers, resolutions were sought and found. The intake supervisor of the CPS unit was assigned as liaison between the investigators and the DA's office. The intake supervisor initially addressed all issues involving project procedures and concerns of the investigators. If resolution was not reached, the intake supervisor or the investigators arranged to discuss the issues with the supervisor directly involved in the controversy or the program director and a designated person from the DA's office. Investigators were moved to the same office building as the intake unit and the intake supervisor.

Procedural agreements were reached to allow initial screening of all reports of child abuse and neglect by the investigators, and all telephone intakes would be routinely reviewed by the investigators. The investigators either notified the police department having jurisdiction over the alleged offense or made sure the intake worker made the appropriate notification. The investigators then reviewed each report to assess the presence of criminal acts and the appropriateness of criminal prosecution.

The intake supervisor's secretary was assigned to perform clerical duties for the investigators. She prioritized the work according to the urgency required and met deadlines. Supplies were furnished by the DA's office, and DHR furnished cameras, tape recorders, and tapes. A videotape recorder was donated by a private local firm for use in taping initial interviews with child abuse victims. It was the plan for initial interviews with children to be handled jointly by child protective services workers and investigators. Because of the tapes the children did not have to repeat their account of the abuse incidents to the many separate entities in the law enforcement system.

Investigators were placed on 24-hour call to assist intake workers with initial investigations. Each investigator was on call-back status for 15 consecutive days to assist workers in cases of emergency. The call-back period included weekends, holidays, and after duty hours. Each investigator was assigned to answer the emergency calls of a specific CPS unit. The units called either of the other two investigators if their assigned investigators could not be reached immediately. This system was expected to enhance the relationship between the CPS units and the investigators. The presence of investigators with expertise in criminal cases has greatly facilitated the gathering of proper evidence. This procedure ensured that investigations were handled in a manner that would not jeopardize the gathering of evidence needed to pursue criminal prosecution.

Review and Investigations

There were many reasons for the low number of reviews/investigations of suspected child abuse prior to the implementation of this project. Cases of child abuse and neglect were often dismissed by police departments in Fort Worth and surrounding areas because they lacked the time to pursue and gather the necessary evidence to build a substantial case. DHR could not devote the time to acting as liaison to all the police departments in Tarrant County to encourage the pursuit of the cases.

An additional deterrent to increasing the number of criminal case reviews/investigations before the project was the absence of a specific attorney to review each child abuse case to determine its suitability for prosecution. Attorneys reviewed thousands of criminal cases from surrounding areas and did not give special attention to child abuse cases because of the difficulty encountered when trying to assemble evidence to prove the case in court.

Although there is still no specific attorney to review child abuse/neglect cases, the three investigators hired for the project were able to help the cases through the system by being available to gather missing evidence and facts needed by the DA's office. Full-time investigators serving as liaison between the DHR and the DA's office were able to devote the time needed to gather evidence for criminal prosecution. Investigators were instrumental in convincing the DA's office of the value of using videotaped interviews of sexually abused children in grand jury proceeding in lieu of having the child appear before the jury. Reviews of cases by the district attorney's office was increased with this visible evidence.

The difficulty of assembling evidence and presenting it to the DA's office prior to the project was a primary reason for so few filings of criminal cases of suspected child abuse. The investigators increased the number of criminal cases of suspected child abuse filed because they had the time and expertise to pursue cases that were either extremely complicated or required a lot of time. The investigators worked with DHR staff, who most often had preferred not to pursue prosecution but felt treatment was best. Other municipalities outside Fort Worth often did not pursue cases under their jurisdiction because they lacked the manpower to devote to the extensive investigations required for child abuse cases. Some law enforcement agencies simply did not choose to pursue cases of child abuse and neglect. Because of the project, investigators identified gaps in information and pursued leads that allowed the filing of more criminal cases of suspected child abuse/neglect.

Project investigators were commissioned by the Tarrant County District Attorney's Office and had county-wide jurisdiction and investigative powers. Because of a great deal of public relations work and county-wide investigative powers, they legally pursued and investigated cases in outlying areas when some law enforcement agencies discontinued investigation. Investigators gained the respect and credibility of other law enforcement officers. Their knowledge of law enforcement techniques gave them commonalities on which to build. When investigators followed up on cases of child abuse/neglect and found that police departments had closed a case, they openly discussed the situation, and many times police departments relinquished jurisdiction of suspected cases of criminal child abuse and neglect to the investigators. Other instances of cases pursued by investigators that otherwise would have been dropped were suspended cases, cases closed because the child had left the jurisdiction of a certain municipality, and cases closed because they lacked enough evidence to prosecute. Having the time to devote to these cases allowed a much closer review of case situations and led to more follow up investigations.

Investigators encountered another problem in the project that was anticipated by project decision-makers. Radio-equipped vehicles were not available to the investigative unit. In order to gather the necessary evidence and follow up on leads, the investigative unit had to use their own vehicles for transportation. Investigators felt the use of automobiles without radios was hazardous. On more than one occasion investigators felt their lives were endangered because they could not summon assistants when making an arrest or serving warrants. They also felt the transportation allowance, 19 cents per mile, was inadequate reimbursement for the use of their own automobiles. The low reimbursement rate influenced the number of miles investigators were willing to travel to gather evidence.

Public Relations

The investigators acted as liaisons between the Da's and the CPS caseworkers. Investigators were called by prosecutors to gather items of evidence that were previously lost to them. They were asked to follow up on details and to obtain more information when it was needed to strengthen cases. Relationships were formed by investigators that were absent between DHR case workers, the community, law enforcement agencies, and the district attorney's office. Investigators received requests from surrounding municipalities and Fort Worth to coordinate cases with the DHR.

The public relations function was added to the duties of the special investigative unit. The unit was helpful in obtaining additional news coverage that gave exposure to the problem of child abuse/neglect in Tarrant County. One investigator conducted sessions on child abuse investigation techniques at every class of the police recruit school of the Tarrant County Junior District College. Since the beginning of this project year, investigators conducted seminars for several community groups in the Tarrant County area. Public opinion and public awareness about the problem of child abuse/neglect appeared to have influenced the number of criminal cases filed. This awareness of the problem has also resulted in more requests for information about the project and about reporting procedures for suspected child abuse incidents.

EVALUATION

The grant period did not allow sufficient time to accurately assess the effects of police involvement in the investigation of child

protective services cases. However, DHR and Texas Christian University (TCU) were awarded a grant by the Hogg Foundation on September 27, 1982, for a joint evaluation project, and they will study the impact of law enforcement involvement with families of victims of sexual abuse. The grant period is October 1, 1982, through January 21, 1984. The evaluation will measure short- and long-term impact on families. Because of the nature of the criminal justice system--its complexity and the length of time it takes to get cases into the courtroom--no accurate measure of the project's impact can be made at the end of this PL 93-247 grant period, August 31, 1983.

RECOMMENDATIONS

An agency giving consideration to replication of this project either in part or in whole, should be aware of the problems encountered during this two-year demonstration period. While the project has proven beneficial, a number of areas should be addressed before implementation to eliminate problems due to procedural details. The following list addresses ways to avoid some of the problems that delayed the smooth operation of the Special Investigative Services Project:

1. The possibility of housing the investigators in a special unit at a police precinct should be explored. DHR management suggests that a unit made up of DHR workers, investigator, and police officers on the traditional police force would help eliminate the confusion about roles.

2. Consultation with and involvement of the police department is essential before the project is made operational.

3. Roles and responsibilities for child abuse investigative referrals should be discussed, defined, and agreed upon before the project starts. Procedures should be clearly spelled out.

4. Every division within an agency to be impacted by this arrangement should be oriented about its purpose, staff, and procedures.

5. The district attorney's office should be approached about the possibility of designating a specific attorney(s) to review and discuss child abuse cases with investigators.

6. Each affected police department should be asked to designate a liaison person to interact with the investigative unit.

7. Daily operational procedures must be addressed and clearly stated. Procedures should speak to housing, supplies, equipment, clerical assistance, telephones, liaison person, supervisor, and lines of authority.

8. A decision should be made about the need to furnish investigators with radio-equipped automobiles. Equitable reimbursement rates should be set if they provide their own transportation.

9. A system should be devised to keep a record of the number and types of cases handled by the investigative unit and of the case outcome(s).

SUMMARY

The participants in this project readily affirmed that they encountered numerous problems while trying to implement the Special Investigative Services Project in Fort Worth, Texas. It was the consensus of project participants that lack of communication between all involved parties was the core of these problems. They agreed, too, that the project has been well worth the effort and manpower involved to solve the problems that surfaced. The belief that child abuse and neglect cases will be managed in a more decisive and productive manner when special investigators are used encouraged the participants to work diligently to reach solutions to the problems encountered.

The family impact evaluation is due in September, 1983. Current data indicates that the evaluation may not yield the necessary information to support the belief that the project made an impact on families of victims of child abuse and neglect. The nature of the criminal justice system--the extreme length of time it takes to have cases heard in the courtroom--complicates data collection and assessment processes. Project participants, however, believe that the project has impacted families, law enforcement agencies in Tarrant County, and the DHR's Protective Services for children program.

2

Impact of Protective Services

APPENDIX 2-A

Parenting and Homemaking Instruments

YEARLY EVALUATION REPORT

EXECUTIVE SUMMARY

The administrative staff of child protective services for DHR's Region 10 is developing a computer-based system that will aid in evaluating the impact of specific purchased services on clients. During the first project year, the project staff began developing the parenting and homemaking services components of the system. The evaluation data showed that the staff had successfully developed instruments for assessing purchased parenting and homemaking services. The instruments are currently in use, and both the regional staff and provider agencies are pleased with the product. The staff also developed and started pilot testing a computer-generated reporting system, which will be used to track the clients' services from the provider agency, and began linking this impact evaluation system with two other computer-based management information systems currently operating within the region.

BACKGROUND

Systematic investigation of client outcomes resulting from protective services for children is rarely conducted at the state level. While some work has been done, the field is still in its infancy, and current activities are focused on the evaluation of direct service delivery. Virtually no agencies have addressed the impact of purchased services.

Region 10 of the Texas Department of Human Resources (DHR) has undertaken several projects in the last few years that have been designed to improve the administration of child protective services. Specifically, Region 10 staff have developed and are implementing two computer-based management information systems to assist various levels of staff in case management, supervision, and program administration. The first, the Protective Services Management Information System (PSMIS), was designed to monitor case activities. The second, the Contracted Management Information System (CMIS), was designed to assist in the development, management, and evaluation of purchased social services within Region 10.

Region 10's administrative staff is now extending the evaluation of services by developing a computer-based system that will aid in

evaluating the impact of specific purchased services on clients. When complete, the system will contain data in at least five areas of protective services that are purchased by contract; they include parenting, homemaking, counseling, protective day care, and group home services. Of these services, evaluative measures for the first two were to be developed during the first project year and are the focus of this evaluation. Measures for the remaining services will be completed during the second project year. The new information system will be linked to PSMIS and CMIS.

At project completion, it is expected that data will be available for evaluating the quality of contracted services to individual clients and client groups. Thus, the regional staff expects that as a result of this system the quality of service will improve, services will be more cost-effective, and the probability of gaps occurring in services will be reduced. Computer-generated reports will be developed to provide data that can be used in determining the overall effectiveness of services. Finally, linking the new system with PSMIS and CMIS is expected to provide Region 10 with a sophisticated and comprehensive data management system for protective services that can be effectively planned and administered.

PURPOSES OF THE EVALUATION

The purposes of the evaluation for the Impact of Protective Services Project are as follows:

- to determine whether a regionally based impact evaluation system that is intended to provide data on client outcomes resulting from contracted service delivery was developed and implemented,

- to determine whether a computer-generated reporting system that is intended to detail the effectiveness of purchased services was developed and implemented, and

- to determine whether the proposed impact evaluation system was integrated with the existing Protective Services Management Information System for direct delivery of services and the Contract Management Information System for purchased social services.

RESULTS/STATUS OF OBJECTIVES

The primary goal of the evaluation was to determine the extent to which the project achieved success in the design and implementation of a computer-based impact evaluation system. A nonempirical research design was used for the study. Specifically, a qualitative evaluation was conducted. Data documenting the project's progress were obtained through semistructured interviews with project principals and a review of monthly and quarterly reports. This evaluation strategy was chosen because it caused only minimal disruption in the development and implementation of the proposed system while permitting a thorough evaluation effort.

The results and discussion will be presented by evaluation question.

Was the project successful in developing and implementing a regionally based impact evaluation system for contracted services in the areas of parenting and homemaking services? Instruments for the evaluation of contracted parenting and homemaking services were successfully developed by the project staff. The project staff chose a successive-review procedure for instrument development. Each subsequent revision of the instruments was based on review and comment by project staff, regional administrative staff, field supervisors, and caseworkers. The latest versions are presented in Appendix 2-A. The instruments were reviewed by the Giles Child Care and Family Center, the Stephen F. Austin State University In-Home Education Program, and the Program for Human Services. These three agencies provide contracted parenting and/or homemaking services in Region 10. The following excerpt from the project's monthly report for December 1982 summarizes comments by regional staff and providers.

> The most consistent comments were (1) the scales were behaviorally specific and defined client problem areas much better than current forms, (2) the assessment form would aid in the determination of when services could be terminated or point to clients who were not benefiting from the services, (3) the scales would aid in writing more meaningful reports and plans for service, and (4) overall there was a general opinion that the services would improve (as a result of the instruments).

Data collection began in January 1983 with draft forms of the instruments. So far 140 clients have been or are currently being served under the new system; 10 supervisors and 63 caseworkers in the region are using the new forms. An automated tickler system has been

developed so that midpoint assessments of clients by the service providers could be timely. The project director has also begun interviewing clients to determine the effectiveness of the new system, and the project staff has developed a client questionnaire, which appears in Appendix 2-B. The project now retains a data collection specialist who has responsibility for the entry of data into the computer system. A screen for entering data has been developed to facilitate data entry at the computer terminal.

Although the instruments appear to be well received by both providers and caseworkers, and both the providers and caseworkers have indicated that services have improved since the new system was implemented, there has not yet been any systematic attempt to demonstrate that perception empirically.

Was the proposed computer-generated reporting system developed, and is it operating? The development of the computer-generated reporting system is being assisted by a consultant, Kathleen Balanger. As with the development of instruments, the project staff is using a successive-revision procedure for the development of the reports. Caseworkers, supervisors, and regional administrative staff review the documents. The project staff also sought input from the Region 10 MIS Monitoring Committee, which oversees the region's management information systems.

The primary goal of the project staff was to develop output reports that would be maximally useful to caseworkers, and caseworker input was used extensively in the development process. Within each contracted area (i.e., parenting and homemaking), three output reports will be produced: at the beginning of services, at midpoint, and at completion. Appendix 2-C contains sample output reports. The reports are not yet being used in the region because one of their components requires information from the CMIS, which is not yet fully operational, and the staff is waiting for the programmers to develop software for the final version of the instruments.

Was the proposed impact evaluation system successfully integrated with the Protective Services Management Information System and the Contract Management Information System? The integration of the present system with PSMIS and CMIS continues to be delayed because of delays in the implementation of CMIS. While CMIS is not yet operational, the project staff has started the integration process. John Cox, programmer of the PSMIS, has been retained as a consultant for this phase of the project. The staff has identified data elements that are common to both PSMIS and the parenting and homemaking forms, and the computer-generated data entry screen has been programmed so that common information can be extracted directly from PSMIS. As with all other phases of the project, the project staff has consulted with

the regional Management Information System Committee and Kathleen Balanger.

Ancillary Activities. The project staff has started developing the instruments for the protective day care and group home components of the project. Dr. Emily Vargas Adams of the Center for the Development of Non-Formal Education in Austin has been retained as a consultant for the development of the protective day care instrument. The project staff decided to use a standardized instrument, the Devereux Adolescent Behavior (DAB) Rating Scale, as the instrument for assessing the impact of group home contracted services. Pilot testing of the instrument is in the initial phase.

LIMITATIONS

The major activity of the project's first year was the development of two components of an impact evaluation system. The system is still under development, and it is premature to determine the effects of the system on clients and benefits to regional staff. Without such impact analysis, the evaluation of the project remains limited.

APPENDIX 2-A

Parenting and Homemaking Instruments

PARENTING ASSESSMENT

CONTRACT NAME _____ CASE NAME _____

PROVIDER NAME _____ CASE # _____

WORKER NAME _____ ASSESSMENT PERIOD:

WORKER EIN _____ ___Initial ___Interim ___Final

DATE COMPLETED _____

If Final Assessment, please check reason.

___1) Client moved
___2) Goals reached
___3) Max. hours service reached
4) Case returned to DHR due to:
___ 4a) Client uncooperative
___ 4b) No case progress
___ 4c) Situation worsened
___ 4d) Failure to keep appointments

Please circle each item below.

		LEVEL OF SEVERITY			
		None	Min.	Mod.	Maj.
I.	**Expectations of Children**				
1.	Child(ren) are expected to do adult chores (getting meals, caring for other children, etc.)	1) 0	1	2	3
2.	Child(ren) are expected to behave extraordinarily well	2) 0	1	2	3
3.	Child(ren) are allowed to do things too dangerous for their abilities	3) 0	1	2	3
4.	Child is treated as too much of a baby (older child with bottle, etc.)	4) 0	1	2	3
5.	Other _____	5) 0	1	2	3
II.	**Taking Care of Basic Physical Needs**				
1.	Child(ren) are inadequately or inappropriately fed	1) 0	1	2	3
2.	Child(ren) inadequately or inappropriately clothed	2) 0	1	2	3
3.	Child(ren) aren't supervised, are left alone, etc.	3) 0	1	2	3
4.	The home is unsafe	4) 0	1	2	3
5.	Medical help isn't sought when necessary	5) 0	1	2	3
6.	Medical treatments are misunderstood, discontinued, improperly administered	6) 0	1	2	3
7.	Child(ren) aren't immunized	7) 0	1	2	3
8.	Child(ren) aren't protected from abuse by others	8) 0	1	2	3
9.	Child(ren) aren't allowed to participate in activities encouraging physical coordination or growth	9) 0	1	2	3
10.	Other _____	10) 0	1	2	3
III.	**Appropriate Discipline**				
1.	Parent punishes and disciplines infant	1) 0	1	2	3
2.	Parent doesn't explain to child what's expected of him	2) 0	1	2	3
3.	Emphasis is placed on punishment rather rewards	3) 0	1	2	3
4.	Parent doesn't discipline at all	4) 0	1	2	3
5.	Punishment is too severe, even injuring child	5) 0	1	2	3
6.	Limits set are inflexible or inappropriate	6) 0	1	2	3
7.	Parent doesn't help child(ren) learn self-control	7) 0	1	2	3
8.	Discipline is inconsistent	8) 0	1	2	3
9.	Parent uses negative statements more frequently than positive	9) 0	1	2	3
10.	Other _____	10) 0	1	2	3

		LEVEL OF SEVERITY			
		None	Min.	Mod.	Maj.
IV.	Encouragement of Intellectual and Emotional Growth				
1.	Parent generally ignores child	1) 0	1	2	3
2.	Parent doesn't show enough affection, sympathy, pride etc., toward child	2) 0	1	2	3
3.	Parent takes little interest in child's school work	3) 0	1	2	3
4.	Parent doesn't provide intellectual stimulation (no toys, books, exploration is limited)	4) 0	1	2	3
5.	Infant is left in crib or playpen, bottle is propped, etc.	5) 0	1	2	3
6.	Verbal interaction between parent and child is limited	6) 0	1	2	3
7.	Child(ren) miss school frequently	7) 0	1	2	3
8.	Parent belittles child frequently	8) 0	1	2	3
9.	Other _____	9) 0	1	2	3

Please give your opinion of this client's overall functioning in each of the following areas.

	Very Good	Good	Adequate	Poor	Very Poor
I. Expectations of Children	1	2	3	4	5
II. Taking Care of Basic Physical Needs	1	2	3	4	5
III. Appropriate Discipline	1	2	3	4	5
IV Encouragements of Intellectual and Emotional Needs	1	2	3	4	5

1. Does client recognize he/she has a problem in the areas listed? ____Yes ____No
2. Does client possess specific skills to remedy problem? ____Yes ____No
3. Does client lack motivation? ____Yes ____No

REMARKS:

HOMEMAKER ASSESSMENT

CONTRACT NAME_____ CASE NAME_____

PROVIDER NAME_____ CASE #_____

WORKER NAME_____ ASSESSMENT PERIOD:

WORKER EIN_____ ___Initial ___Interim ___Final

DATE COMPLETED_____

If Final Assessment, please check reason.

___1) Client moved
___2) Goals reached
___3) Max. hours service reached
4) Case returned to DHR due to:
___4a) Client uncooperative
___4b) No case progress
___4c) Situation worsened
___4d) Failure to keep appointments

Please circle the items below which are a problem for your client, even if you don't currently plan to work on the problem.

		LEVEL OF SEVERITY			
		None	Min.	Mod.	Maj.
I. Meal Planning and Preparation					
1. Child(ren) underfed	1)	0	1	2	3
2. Child(ren) fend for themselves for meals	2)	0	1	2	3
3. Food poorly stored, susceptible to spoilage, insects, etc.	3)	0	1	2	3
4. Poor quality meals (high starch, sugar, junk food)	4)	0	1	2	3
5. Infants fed wrong foods (whole milk vs.formula, etc.)	5)	0	1	2	3
6. Other_____	6)	0	1	2	3
II. Housekeeping					
1. House full of garbage or excrement, etc.	1)	0	1	2	3
2. Dirty sinks, tubs, toilets, floors, piled dishes,etc.	2)	0	1	2	3
3. Bad plumbing poses health hazard	3)	0	1	2	3
4. Rodent/insect infestation	4)	0	1	2	3
5. Other_____	5)	0	1	2	3
III. Physical Safety of Home					
1. Exposed wiring, leaking gas or hot water, broken glass, etc.	1)	0	1	2	3
2. Plastic bags, buttons, screws, etc. around small child(ren)	2)	0	1	2	3
3. Old refrigerator or other hazards in yard	3)	0	1	2	3
4. Poisons, drugs, household cleaners in child's reach	4)	0	1	2	3
5. Family has no house (live in tent, car, etc.)	5)	0	1	2	3
6. Other_____	6)	0	1	2	3
IV. Household Space and Furnishings					
1. Extreme overcrowding	1)	0	1	2	3
2. Not enough beds	2)	0	1	2	3
3. No stove, hot plate, appliances for meal preparation	3)	0	1	2	3
4. No proper refrigeration	4)	0	1	2	3
5. Not enough heaters to warm house	5)	0	1	2	3
6. Other_____	6)	0	1	2	3

		LEVEL OF SEVERITY			
		None	Min.	Mod	Maj.
V. Personal Cleanliness and Clothing					
1. Child(ren) not bathed or hair washed	1)	0	1	2	3
2. Child(ren) has poor dental hygiene	2)	0	1	2	3
3. Child(ren) have lice, scabies, worms, skin rashes, etc.	3)	0	1	2	3
4. Clothes/linens filthy	4)	0	1	2	3
5. Child(ren) lack basic seasonal items; clothes torn, wrong size, etc.	5)	0	1	2	3
6. Other_____	6)	0	1	2	3
VI. Medical/Health Care					
1. Parent does not get medical help for children	1)	0	1	2	3
2. Parent does not react to medical emergencies or reacts inconsistently	2)	0	1	2	3
3. Child(ren) not immunized	3)	0	1	2	3
4. Parent does not store or administer medicine properly, discontinues treatment prematurely	4)	0	1	2	3
5. Other _____	5)	0	1	2	3
VII. Management of Resources					
1. Family frequently behind in rent, utilities, etc.	1)	0	1	2	3
2. Food supply doesn't last through month	2)	0	1	2	3
3. Management of time is poor	3)	0	1	2	3
4. Child(ren) often miss school or are late	4)	0	1	2	3
5. Consistently late or misses appointments	5)	0	1	2	3
6. Does not initiate contacts with agencies	6)	0	1	2	3
7. Discontinues services prematurely	7)	0	1	2	3
8. Other_____	8)	0	1	2	3

Please give your opinion of this client's overall functioning in each of the following areas.

	Very Good	Good	Adequate	Poor	Very Poor
I. Meal Planning and Preparation	1	2	3	4	5
II. Housekeeping	1	2	3	4	5
III. Physical Safety of Home	1	2	3	4	5
IV. Household Space and Furnishing	1	2	3	4	5
V. Personal Cleanliness and Clothing	1	2	3	4	5
VI. Medical/Health Care	1	2	3	4	5
VII. Management of Resources	1	2	3	4	5

1. Does client recognize he/she has a problem in the areas listed? ____Yes ____No

2. Does client possess specific skills to remedy problems. ____Yes ____No

3. Does client lack motivation? ____Yes ____No

REMARKS:

APPENDIX 2-B

Client Instrument

We are interested in knowing how you feel about _____
who has been visiting you.

1. Did she do anything to help you? (Please circle one)

   a. No
   b. Yes
      If yes, what things did she do to help you?

2. Was she friendly? (Please circle one)

   a. Most of the time
   b. Some of the time
   c. Not usually

3. How did you feel about her coming to your home? (Please circle one)

   a. I didn't like it at all
   b. At first I didn't like it, but I decided I liked it later
   c. I liked it from the beginning
   d. I didn't care; it didn't make any difference.

4. Would you have liked her to do more for you? (Please circle one)

   a. No
   b. Yes
      If yes, what would you have liked her to do?

5. Did she show up when she was supposed to? (Please circle one)

   a. No
   b. Yes

6. Did she visit you:

   a. Not often enough
   b. Too often
   c. Just the right amount of times

7. Would you tell your friends to use her? (Please circle one)

   a. Yes
   b. No
      If no, why not?

8. Would you ask your caseworker to have her come again if you needed her? (Please circle one)

   a. Yes
   b. No

9. What did you like most about what she did?

What did you not like?

10. If you have anything else you would like to say about her, you may write it here:

APPENDIX 2-C

Sample Output Reports

DRAFT

SFA Homemaker Program
Initial Impact Assessment Report

SENT TO: CASEWORKER
PROVIDER

DATE ASSESSMENT COMPLETED
BY WORKER AND PROVIDER

WORKER: Edith Holloway
SUPERVISOR: Grady Rhodes
HOMEMAKER: Melvin Simon

1. Doe, Jane
456789112
DOB: 12/18/55

Ongoing Case
Opened 12/11/82
Referred to SFA
Homemaking on 12/21/82

Prior Referrals to this
Contract:
01/01/81
06/18/81

Other Contracts Serving
Client:

SFA Parenting
Grigsby

TARGET PROBLEMS

A. Major Problems
Time Management

B. Moderate Problems
Dental Hygiene
Financial Management

C. Minimum Problems
Child underfed
Infant feeding
House littered with dangerous items
Child's clothing
Inappropriate reaction to medical problems
Inadequate food supply
No initiation of agency contact

Obstacles
No recognition of problem

Areas of Poorest Functioning
Meal planning and preparation
Personal cleanliness
Management of Resources

DRAFT

SFA Homemaker Program
Interim Impact Assessment Report

SENT TO: CASEWORKER
PROVIDER

DATE ASSESSMENT COMPLETED BY PROVIDER

WORKER: Edith Holloway
SUPERVISOR: Grady Rhodes
HOMEMAKER: Melvin Simon

	TARGET PROBLEMS	PROBLEMS SOLVED
1. Doe, Jane 456789112 DOB: 12/18/55 Ongoing Case Opened 12/11/82 Referred to SFA Homemaking on 12/21/82 Prior Referrals to This contract: 01/02/81 06/18/81 Other Contracts Current'y Serving Client: SFA Parenting Protective Day Care	<u>Major Problems</u> * Immunization <u>Moderate Problem</u> + Time Management Dental Hygiene Financial Management - Inadequate food supply <u>Minimum Problems</u> Inappropriate reactions to medical problems No initiation of agency contact	House littered with dangerous items Child's clothing Child underfed Infant Feeding <u>Obstacles</u> Lacks skills <u>Areas of Poorest Functioning</u> Medical Health Care Management of resources Personal cleanliness

+ Denotes Problems Improved from Last Assessment
- Denotes Problems Worse from Last Assessment
* Denotes New Problem Since Last Assessment

DRAFT

SFA Homemaker Program
Final Impact Assessment Report

SENT TO: CASEWORKER
PROVIDER

DATE ASSESSMENT COMPLETED
BY WORKER AND PROVIDER

WORKER: Edith Holloway
SUPERVISOR: Grady Rhodes
HOMEMAKER: Melvin Simon

1. Doe, Jane
456789112
DOB: 12/18/55

Ongoing Case
Opened 12/11/82

Referred to SFA
Homemaking on
12/21/82

Prior Referrals to
This contract:

01/02/81
06/18/82

Other Contracts Currently
Serving Client:

SFA Parenting
Protective Day Care

TARGET PROBLEMS

Major Problems

Moderate Problems
Time Management
Financial Management
Dental Hygiene

Minimum Problems
+ Inadequate Food Supply

PROBLEMS SOLVED

Immunization
Inappropriate
reactions to
medical problems
No initiation of
agency contact

Obstacles

Areas of Poorest
Function
Management of re-
sources

+ Denotes Problems improved from Last Assessment
- Denotes Problems worse from Last Assessment
* Denotes New Problems

Overall improvement since referral in main areas of meal planning and preparation, personal cleanliness, medical/health care.

Main areas which are worse or remain same since referral: Management of Resources

3

Project to Study Fair-Hearings Practices in Child Protective Services

YEARLY EVALUATION REPORT

EXECUTIVE SUMMARY

The Project to Study Fair-Hearings Practices in Child Protective Services was designed to research current practices, legal issues, and practice-related issues involved in the provision of fair hearings for child protective services (CPS) clients. The project staff and consultants completed a survey of current practices of 49 states and research reports on legal and practice-related issues. These research reports are currently being reviewed by program and legal staff and will be released next year. Model practices and draft written materials have been developed and will be pilot-tested during the second year of the project.

BACKGROUND

The Texas Department of Human Resources (DHR) is the agency responsible for receiving and investigating reports of suspected child abuse and neglect. When such cases are found, and CPS are required to prevent further harm, DHR provides these services. DHR clients may request a fair hearing in order to appeal decisions. Although fair hearings are provided for all DHR social service clients, the department has not designed policies specific to CPS for routinely notifying clients about all available services and about their right to a fair hearing. Also, DHR has not established program-specific methods for providing fair hearings for these clients. Because CPS clients differ from other DHR clients in that they do not ordinarily request services, it is possible that notification and fair-hearings policies used for other program areas are inappropriate. Recent legal actions against DHR have shown the need to clarify these issues and investigate the need for a special fair-hearings policy. The Project to Study Fair-Hearings Practices in Child Protective Services was designed and implemented in DHR's Region 10 to study issues related to fair hearings, in order to determine whether special policy and practices are necessary for these clients and, if indicated, to prepare model practices and related client materials.

OBJECTIVES

The project, which involves researching current legal, social work, and practice-related issues connected with the provision of fair hearings for CPS clients, has five objectives. The final two objectives will be pursued only if the research findings indicate a need.

- Objective 1: to design and conduct a study of current practices in fair hearings in CPS;
- Objective 2: to research social work and practice-related issues associated with fair hearings in CPS;
- Objective 3: to research legal issues involved in fair hearings in CPS;
- Objective 4: to develop model practices related to fair hearings in CPS, including the design of a pilot test to study implementation potential (this objective will be pursued only if it is determined that fair hearings are legally required or programmatically indicated); and
- Objective 5: to prepare draft written materials for clients, which describe the services available to CPS clients and/or notify clients of their right to a fair hearing (this objective will be pursued only if it is determined that fair hearings are legally required or programmatically indicated).

RESULTS/STATUS OF OBJECTIVES

Objective 1: to design and conduct a study of current practices in fair hearings in child protective services. Preliminary questionnaires and a follow-up telephone survey resulted in a 100 percent response rate to a questionnaire sent to 49 states. Tabulated data and statistics were presented to CHR's Executive Committee and to project consultants in February 1983. The study identified the following current practices and issues:

- the absence of routinely available fair hearings in CPS;
- the existence and substance of specific CPS policy relating to fair hearings;

- o the use of notice to advise CPS clients of services available to them;

- o the use of notice to advise CPS clients of their right to a fair hearing; and

- o the anticipation of problems and benefits from required fair hearings.

The draft of the research report on the survey of 49 states regarding current practices in CPS fair hearings is being reviewed by program and legal staff and will be released next year.

Objective 2: to research social work and practice-related issues associated with fair hearings in child protective services. The consensus of project consultants Dr. Alexander Zaphiris and Dr. Donald Dickson, who researched social work and practice-related issues associated with fair hearings, was that something less than an extensive, formal fair hearing would be appropriate for the purposes of CPS. Each consultant offered concrete recommendations in his draft report. The research reports are being reviewed by program and legal staff prior to release next year.

Objective 3: to research legal issues in fair hearings in child protective services. Professor Mark G. Yudof submitted his final report on the constitutional requirements and implications of informal due process protection in preadjudicatory phases of CPS. Again, the research report is being reviewed by program and legal staff prior to release next year.

Objective 4: to develop model practices related to fair hearings in child protective services, including the design of a pilot test to study implementation potential. The three consultants and the project's regional executive committee explored several alternatives for model practices in fair hearings. The consensus of the group was that an extensive formal model is not the unique solution to legal or programmatic requirements for due process protection of CPS clients. The consultants have explored the feasibility of (1) interdisciplinary review panels, (2) expansion of the case planning process, (3) periodic case reviews, and (4) administrative reviews as possible model practices for fair hearings. Consultants analyzed the flexibility, adaptability, client protection (child as well as parents), and cost-efficiency of these alternatives. The final draft policies developed by the consultants and the executive committee are being reviewed by program and legal staff and will be pilot tested next year.

Objective 5: to prepare draft written materials for clients that describe the services available to child protective services clients and/or notify clients of their right to a fair hearing. The study of current practices in fair hearings indicated nationwide variation in the use of notices. Thirty-five states indicated that fair hearings were available to CPS clients. Nine states routinely inform clients about this right, but only four of the nine--Arizona, Delaware, Iowa, and Ohio--use a written notice. Dr. Dickson made an on-site investigation with Delaware officials of CPS workers' and clients' attitudes about the CPS written material and its impact on service delivery and volume of fair-hearings requests in Delaware.

The project director, Jim Saunders, made an on-site investigation of the Child's Rights Unit of the New York City Social Services Division of the Human Resources Department. He examined the city of New York's procedures for investigation of CPS grievances and discussed with local officials the city's policy on children's rights to file CPS grievances.

The project staff developed draft materials based on Delaware's model for fair-hearings notice and the city of New York's policy on filing CPS grievances. These drafts have been reviewed and approved by Region 10 and state office program and legal staff.

LIMITATIONS

The main limitation of the evaluation is that it addresses only the status of the project's objectives. No assessment was made of the quality of the research or the draft policies and materials.

4

Group Services for Child Protective Clients

YEARLY EVALUATION REPORT

EXECUTIVE SUMMARY

The Group Services for Child Protective Clients Project was established in DHR's Region 9 to develop effective group services skills among regional child protective services (CPS) personnel. Eighty-eight staff members and two volunteers received the two-day overview training, 66 caseworkers and unit supervisors then participated in the 12-week experiential groups, 40 of the group trainees were paired into teams for supervised leadership of weekly client groups, and 11 client groups were provided to selected rural and urban CPS clients. Scores on the proficiency test and group leadership rating instruments indicate that trainees may need more group services training and experience to meet the standards established--31 percent of the total sample achieved the criterion of 70 percent or higher on the proficiency test, and 61 percent met the criterion of scoring three out of four points on at least 7 of the 10 group leadership rating scales. The group services training program will be refined in the second project year, and a structure will be established in Region 9 to ensure continuation of project efforts after termination of project funding.

OVERVIEW

Due to reductions in funding for social services and increased case loads, it has become increasingly important that the services offered to clients be as effective as possible in addressing client needs. Reduced funding and increased caseloads make group work an attractive service alternative for some kinds of clients of the Texas Department of Human Resources (DHR). For CPS clients, peer support groups may be more appropriate than individual services, for these clients are often isolated and lack appropriate socialization. In addition to being an effective form of treatment for CPS clients, group services can be less costly than individual services because a caseworker can work with a number of clients simultaneously.

In order to work effectively with CPS client groups, workers must have adequate knowledge of group dynamics and the special problems inherent in group interaction of CPS clients. Caseworkers also need leadership skills so that they can facilitate constructive activ-

ity within the client groups. When the group services project was planned, few caseworkers had the necessary knowledge and skills in group work. Besides a lack of training, CPS caseworkers routinely function in high stress environments. Job stress can hamper effective group and individual service delivery because workers under stress often have less energy and creativity to apply towards resolution of client problems.

In Fiscal Year 1983, the Group Services for Child Protective Clients Project was established in DHR's Region 9 to develop effective group services skills among regional CPS personnel. The project has three major components: (1) group services training, (2) provision of group services, and (3) continuation of training and group activities after termination of project funding. Specific objectives were developed for each of these components.

PURPOSES OF THE EVALUATION

The evaluation of the project employed both process and outcome methodologies to assess the extent to which the project was successful in meeting its objectives. Outcome measures focused on the extent to which training was successful in making protective services employees proficient in group services techniques. Process evaluation procedures determined whether planned activities were carried out.

EVALUATION METHODOLOGY

Proficiency in providing group services could not be evaluated without using standards and determining the extent to which they were met. The project staff developed proficiency standards based on the training curriculum, and proficiency tests were used to determine the level of attainment. These tests included an examination of participants' knowledge about group theory and ratings of proficiency taken during the project's supervised practice phase. (The instrumentation subsection below gives details on the assessment instruments.)

The project staff did not define a specific number or percentage of trainees who were expected to attain the established proficiency levels. Although it was not expected that all trainees would do well, it was hoped that a substantial number would attain these levels in group services theory and in practice skills. However, the project staff realized that the standards set were those for a competent and experienced group facilitator and that many trainees would require two years of group training to reach the proficiency levels. In order to

guard against bias, ratings of each trainee's practice skills were provided by a regional CPS supervisor who was not on the project staff. This independent rater was a person with experience in group services.

The process evaluation was used to determine whether activities were carried out within established time frames. Major problems with project installation, problem resolution, and consequent effects were noted.

Instrumentation

Two instruments were employed to determine staff proficiency in group services. These instruments were constructed specifically for this project and were tailored to fit the training curriculum devised by project staff.

The first instrument, a curriculum proficiency test (see Appendix 4-A, Group Services Test), addressed the extent to which trainees had acquired sufficient knowledge of group behavior and group dynamics, group facilitator roles, and group processes. The test, which was developed by the project staff with assistance and psychometric consultation from evaluation specialists, included items intended to determine mastery of skills needed for group leadership. Responses from a pretest on a small group of initial trainees were used to determine which questions needed rewording and the minimum score needed to show satisfactory performance. A score of 70 percent was established as the criterion for satisfactory knowledge of group services theory.

The second instrument, also developed by the project staff with assistance and consultation by the evaluation staff, employed rating scales to assess performance in the practical experience component of training. Ten dimensions of group leadership performance were assessed on four-point rating scales (see Appendix 4-B, Group Leadership Rating Scale). It was decided that a rating of three out of four possible points on at least 7 of the 10 scales would indicate development of acceptable skills in group leadership.

Data Sources

Scores on the knowledge test and practical experience ratings were used to assess the outcome of the training activities. The project staff was responsible for data collection, and the evaluation staff was responsible for data compilation and descriptive analysis.

Data sources for the process evaluation consisted of all records, memoranda, data summaries, and reports of activities prepared by the project staff. These sources were made available to the evaluation staff on a regular basis by the project director.

RESULTS/STATUS OF OBJECTIVES

The goal of the Group Services for Child Protective Clients Project is to improve the effectiveness of services provided to clients by making group services available to those who would benefit from them. The project has three objectives, which are used as evaluation questions in the following discussion of results.

Evaluation Question 1: Was the project successful in training CPS workers to be proficient in providing group services? The project's first objective was to design and implement a training program that would enable Region 9 CPS staff to provide group services to CPS clients in a proficient manner. The project staff developed a training program consisting of three major components: (1) two-day overview training sessions, (2) 12-week experiential groups, and (3) 12 weeks of supervised leadership of client groups.

During the project's first year, all regional CPS staff members received a one-hour orientation to group services, and 88 staff members and two volunteers received the two-day overview training. The overview training session covered basic theories of group dynamics and practice. Attendance was not mandatory, yet approximately 80 percent of the regional program staff participated in the overview training.

Sixty-six interested staff members (both caseworkers and unit supervisors) then participated in the 12-week experiential groups. Trainees served as group members, and project personnel led the groups. The trainees experienced the different phases in group development and the dynamics of group interaction in these meetings. At the end of each session, project staff members led the groups in discussions of group processes, reinforcing and expanding the trainees' knowledge of group theory.

Out of the 66 trainees who completed the 12-week experiential groups, 40 were paired into teams for supervised leadership of weekly client groups. During the last quarter of the project year, 11 trainee teams conducted client groups. Once a month, project staff members observed the sessions. In addition, project staff members met with the trainees weekly to discuss issues of group dynamics and group leadership relating to the trainees' experiences with the client groups. Through this supervised experience, the trainees learned to deliver effective group services to clients.

The major variables for the evaluation of the group services training were scores on the curriculum proficiency test and ratings on the group leadership performance scales. A score of 70 percent or higher on the test of knowledge about group services was established in the evaluation plan as the criterion for judging trainee knowledge. Eighteen of the 59 trainees (31 percent of the total sample) achieved the criterion. The mean score of the 59 people who took the group services proficiency test was 64.9 percent. The relatively low scores on the proficiency test may reflect the need for extended training for many trainees to reach the standards es ablished by the project staff.

The group leadership rating instrument assessed the practical experience component of group services training. The performance criterion for the evaluation of trainee group leadership performance was a rating of three out of four points on at least 7 of the 10 instrument scales. Eleven of the 18 trainees who completed the 12-week supervised leadership of client groups (61 percent of the total) were judged as having developed acceptable skills in group leadership as defined by the evaluation criterion. The average score on the performance instrument was 79.9 percent. Trainees were often able to achieve a high percentage of the total score possible, but some had uneven scores across the 10 scales and thus were unable to meet the evaluation criterion.

In summary to Evaluation Question 1, the results suggest a need for further training for trainees to meet the standards set by the project staff. In addition, project and evaluation staff members have discussed ways of expanding the evaluation components of the project to measure pre/post training improvement as well as proficiency level attainment during the project's second year.

Evaluation Question 2: Did the project implement group services to rural and urban CPS clients with project-trained workers serving as group leaders and with community volunteers providing practical assistance? The project's second objective was to provide supervised group services to selected rural and urban CPS clients in Region 9 with project-trained workers serving as group leaders and community volunteers providing practical assistance. Eleven different client groups were established in rural and urban areas of the region. Each had a membership of five to eight clients with similar problems. Nine of the 11 client groups met once a week for 12 weeks; the other 2 groups concluded their meetings prior to 12 weeks due to low attendance. These 2 groups were composed of neglectful mothers, and the dynamics of these groups made them extremely difficult to maintain. The clients participating in the 11 groups included--

- o abusive parents,
- o abusive or neglectful mothers,
- o older adolescents in substitute care,
- o adolescent victims of sexual abuse,
- o sexual abuse colluders, and
- o battered women involved in child protective cases.

Since CPS clients often have problems that interfere with their ability to participate in groups, practical assistance (such as transportation or child care) was provided. In the rural areas, volunteers were recruited to provide these services. In San Antonio, efforts to recruit volunteers were not as successful, so the region supplied a community service aide who provided this assistance. In addition, one San Antonio child care center voluntarily provided free day care for clients while they attended groups.

Evaluation Question 3: Was a structure established to ensure the continued provision of group services to CPS clients? The project's third objective was to create a structure within the Region 9 protective services program that ensured continued training of staff and provision of supervised group services to CPS clients after termination of project funding. The project staff consulted with the steering committee, the program director, supervisory staff, and the regional director of Services to Families and Children about continued training of staff and provision of group services to CPS clients after project funding ceases. These efforts identified CPS supervisors and other non-DHR personnel who will continue to train group facilitators after the project is completed. In addition, DHR staff development personnel have been involved in structuring the project training, and their continuing training role will be clarified in the second year.

Almost all other activities directed toward the project's third objective were scheduled for the last quarter of the project year. Since the project has been extended, it is logical that these activities be postponed until the second year. This change will permit a more intensive effort be made to ensure the continuation of project efforts. The creation of a continuation structure will be a major focus during the second year.

LIMITATIONS

The evaluation has no major limitations or systematic problems. However, since the curriculum was based on existing staff's needs and existing situational factors in Region 9, project effects are generalizable only to areas with similar characteristics and trainee needs. Similarily, the curriculum proficiency test was devised to examine proficiency as defined by the particular group services model selected for the project and likely yielded proficiency scores unique to that model. Group services proficiency, as determined in the evaluation, should be understood as proficiency according to this particular group process model.

APPENDIX 4-A

Group Services Test

GROUP SERVICES TEST

1. During the first stage of group development, members are most concerned with:

   a) their position in the group
   b) being accepted by/accepting the group
   c) feeling close to other members
   d) problem-solving

2. During the middle stage of development, members are most concerned with:

   a) gaining power and status
   b) problem-solving
   c) expressing understanding and concern
   d) gaining approval of the leader

3. During the final stage of development, members:

   a) engage in frequent conflict
   b) are helpful and mutually supportive
   c) relate superficially
   d) struggle for control

4. "Cocktail party" behavior is indicative of:

   a) a cohesive group
   b) a conflicted group
   c) a beginning group
   d) an advanced group

5. Research indicates a common factor among successful therapists is:

   a) a non-directive approach
   b) an eclectic approach based on the client's needs
   c) a warm, accepting relationship
   d) an active, dynamic leadership stance

6. In group treatment, the major agent of change is:

   a) the theraputic relationship between leader and members
   b) the leader's skill in eliciting self-disclosure
   c) the members' ability to problem-solve
   d) the impact of the group itself

7. A well-selected group reflects:

   a) a variety of personalities
   b) a complementary facilitator style
   c) careful pre-screening
   d) all of the above

8. Support groups usually focus on:

a) the "here and now"
b) maximizing problem-solving skills of members
c) "there and then" experiences
d) a and b
e) b and c
f) all of the above

9. Groups offer clients a chance to:

a) test alternative social interactions
b) practice new behaviors
c) receive feedback from peers
d) all of the above

10. Ground rules for support groups include:

a) confidentiality
b) limiting interaction among members to group sessions
c) clear consequences for destructive behavior
d) a and c
e) all of the above

11. Group process can be defined as:

a) verbal communications in the group
b) nonverbal cues among members
c) vicarious communications
d) all of the above

12. Silence in groups is often:

a) a defensive stance
b) a response to anxiety
c) a result of the need to process what is happening
d) destructive
e) a, b, and c
f) all of the above

13. The appropriate amount of self-disclosure at any given time is primarily determined by:

a) the stage of group development
b) the size of the group
c) the type of group (open or closed)

14. Transference in groups is:

a) "here and now" re-enactment of "there and then" experiences
b) the product of member to member interactions
c) discouraged
d) all of the above

Countertransference in groups is:

a) a projection of the leader's conflicts on members
b) between members
c) a result of inexperience
d) all of the above

Parataxic distortion refers to:

a) the leader's unrealistic perception of members
b) double-bind communications
c) the group members' view of the leader as omnipotent
d) the members' reaction to each other as significant others from the past

In work groups, leadership is tolerated when:

a) it serves the task of the group
b) it promotes collaboration among members
c) it promotes clearly defined boundaries
d) it supports members' needs

The group leader's influence on the formation of group norms is:

a) minimal
b) to be discouraged
c) considerable
e) easily usurped

A group facilitator should provide:

a) technical expertise
b) modeling
c) control
d) all of the above

A group facilitator needs to monitor:

a) group process
b) collusion in defenses
c) boundaries
d) individual reactions to stress
e) scapegoating
f) all of the above

The primary determinant of a successful co-leader relationship is:

a) similarity of style
b) comparable experience
c) similarity of orientation
d) complementarity in sex and age

22. Neglectful mothers are often characterized as:

a) apathetic
b) aggressive
c) manipulative
d) all of the above

23. The major developmental tasks of adolescence include:

a) repression of libidinal drives
b) strengthening of the superego
c) decathexis of the parent
d) all of the above

24. Characteristics of adolescent groups include all of the following <u>except</u>:

a) high anxiety levels
b) high motivation for self-analysis
c) focus on developmental tasks
d) high risk of countertransference

25. A characteristic phenomenon of a group of mothers of sexual abuse victims is:

a) group denial
b) empathic interaction
c) collaboration
d) all of the above

26. According to the research of Yalom, the most helpful curative factor group treatment is:

a) universality
b) cohesiveness
c) instillation of hope
d) interpersonal learning

APPENDIX 4-B

Group Leadership Rating Scale

GROUP LEADERSHIP RATING SCALE

1. CREATES AN ATMOSPHERE CONDUCIVE TO GROWTH AND CHANGE

4 3 2 1
(1)

4 - Maintains an accepting, nonjudgemental stance, provides empathic response through gesture or reflective statement when appropriate, and reduces counterproductive anxiety.

3 - Maintains an accepting, nonjudgemental stance, provides empathic responses when most critical, and sets limits when anxiety becomes overwhelming.

2 - Maintains a neutral stance, fails to make empathic responses when appropriate, and is insensitive to anxiety levels.

1 - Is often rejecting, judgemental, and inappropriately anxiety provoking.

2. PROVIDES POSITIVE NONVERBAL MESSAGES

4 3 2 1
(2)

4 - Maintains positive affective manner and conveys interest and concern through body positioning and movement, eye contact, facial expression, tone of voice, inflections, spacing, and timing.

3 - Maintains positive affective manner and conveys interest and concern through most of the above.

2 - Fails to maintain positive manner and/or displays lack of interest or concern.

1 - Maintains negative affective manner and displays lack of interest and concern.

3. ATTENDS TO STRUCTURAL ASPECTS OF THE GROUP

4 3 2 1
(3)

4 - Adheres to specified time frames, elicits and follows ground rules, maintains consistent limit-setting, provides summary at close of session, prepares members for inclusion or loss of members, prepares group for termination.

3 - Generally adheres to above guidelines though at times may be inconsistent.

2 - Has difficulty following above guidelines though at times may attempt.

1 - Does not attend to structural aspects of the group.

4. MAINTAINS A GROUP FOCUS

4 3 2 1
(4)

4 - Directs interventions to the group, reflects questions back to the group, encourages member to member interactions.

3 - Attempts to direct the group to itself though may get caught in member to leader interactions.

2 - Most interventions are one on one though may occasionally reflect to group.

1 - Maintains an individual focus.

5. IDENTIFIES GROUP THEMES

4 3 2 1
(5)

4 - Synthesizes individual content into group themes, verbalizes common concerns and issues in service of group goals, relates themes over time.

3 - Identifies group themes but does not always bring them to closure.

2 - Focuses primarily on individual content though may occasionally identify group themes.

1 - Focuses on individual content. Does not synthesize material.

6. DIRECTS FOCUS TO THE HERE AND NOW

4 3 2 1
(6)

4 - Moves from out to in, abstract to specific, generic to personal, there and then to here and now.

3 - Usually attempts above focusing though may get caught in extraneous content.

2 - Has difficulty redirecting focus though may occasionally try.

1 - Does not attempt to redirect group focus to the here and now.

7. PROVIDES APPROPRIATE PROCESS COMMENTARY

4 3 2 1
(7)

4 - Consistently reflects on verbal and nonverbal processes in accordance with stage of group development. Utilizes feedback well in determining direction and depth of interventions.

3 - Reflects on verbal and nonverbal processes though may make minor timing errors.

2 - Makes inaccurate or poorly-timed process commentary.

1 - Focuses primarily on content.

8. ADDRESSES GROUP DEFENSES CONSTRUCTIVELY

4 3 2 1
(8)

4 - Discourages subgrouping and scapegoating. Helps group confront absences and tardiness. Approaches other forms of resistence in accordance with stage of group development and utilizes feedback to assess need for defense maintenance.

3 - Attempts above but is inconsistent in exploration and confrontation of resistence and/or makes minor timing errors.

2 - Does not attempt to confront defenses or makes serious timing errors.

1 - Appears unaware of group defenses and/or becomes inadvertently involved in defensive collusion.

9. MAINTAINS A POSITIVE WORKING RELATIONSHIP WITH CO-LEADER

4 3 2 1
(9)

4 - Compliments co-leader in terms of timing, activity and support. Models constructive interaction and effective conflict resolution.

3 - Attempts to work collaboratively with co-leader though balance is inconsistent.

2 - Interventions are congruent with those of co-leader however are characterized by conflict and/or competition.

1 - Interventions are usually incongruent with no evidence of attempted collaboration.

10. MONITORS COUNTERTRANSFERENCE REACTIONS

4 3 2 1
(10)

4 - Maintains a positive, objective stance with all group members. Shows equal regard for the concerns and feelings of all members.

3 - Attempts to maintain a positive, objective stance with all members though may at times show evidence of favoritism and/or negative feelings toward certain individuals, however is able to self-correct independently or with help of co-leader.

2 - Maintains a positive, objective stance with most members though is usually caught in positive and/or negative transference struggles with certain individuals and makes no attempt to self-correct.

1 - Is unable to maintain an objective stance. Is frequently involved in positive and/or negative countertransference struggles with many members.

5

Foster Child Advocate Services

YEARLY EVALUATION REPORT

EXECUTIVE SUMMARY

The Foster Care Advocate Services (FOCAS) Project is designed to recruit and train volunteers as guardians ad litem--court-appointed advocates for children in substitute care. Through visits to a child, a guardian ad litem can provide information to the courts, to the attorney ad litem, and to child welfare staff about any abuse, neglect, or physical inadequacies of the child's placement. Eight guardians ad litem are making regular visits to 13 children in substitute care, and reports of visits and other contacts are transmitted to the child welfare staff. Guardians provide information to attorneys ad litem prior to court hearings through telephone conferences.

Although the project has not been in place long enough for impact measures to be obtained, early assessments by the project director, a child welfare caseworker, and a guardian ad litem have been generally positive. The attorney ad litem felt it was too early to make an assessment of the pertinence of the information given to him by guardians. The project is continuing for another year, and the second year evaluation will include some impact measures.

BACKGROUND

Children who are in the conservatorship of the Texas Department of Human Resources (DHR) may be placed either in an institutional setting or in a foster home. In any placement, there is the chance that further abuse or neglect may occur. Because budget and staff cuts limit the number of worker visits intended to detect and remedy such occurrences, abuse and neglect may be recurring undetected.

In response to the possibility of abuse and neglect going undetected, the Foster Child Advocate Services (FOCAS) Project was established in Wichita County in DHR's Region 4. The project involves recruiting and training guardians ad litem, court-appointed community volunteers who visit children receiving protective services. Guardians ad litem observe the children's care arrangements and identify problems that may occur. FOCAS volunteers receive training on protective services for children and the legal system as it pertains to child welfare.

Guardians ad litem are regarded as extensions of the court, as advocates for the children. The guardians gather information made available to the courts, the attorney ad litem, and the child welfare worker about any abuse, neglect, or inadequacies of the child's placement related to the physical needs of the child. The guardians are expected to monitor court proceedings and permanent planning in child welfare and are urged to participate in case consultation team meetings for children to whom they are assigned.

PURPOSES OF THE EVALUATION

A process evaluation examined the activities of the project. The major purposes of the evaluation are--

- o to determine whether project objectives have been met within the time frame established by the project and
- o to provide summary data and information on the project's activities.

RESULTS/STATUS OF OBJECTIVES

Monthly reports and records prepared by the project staff were examined to determine how well the stated objectives were met during the year. In addition, the evaluator from the Special Studies Section of the Research and Evaluation Division made an on-site visit to Wichita Falls on July 12, 1983, to interview the project director, a guardian ad litem, an attorney ad litem, and a child welfare staff member to get their assessments of the project. The data reported include information up through the date of the interviews.

The goals of the project are to improve the protection of children in substitute care and to make the general community more aware of the needs of these children. Project activities related to the goals will be described in general and for the project's six stated objectives.

General activities. The steering committee, which has provided guidance to the project staff throughout the year, contains the following members:

- o a lawyer (chairman),
- o a Junior League member,
- o a child welfare board member,

- o a child welfare volunteer and child welfare board member,
- o a registered nurse,
- o the administrator of Family Court Services (ex officio), and
- o the child welfare supervisor of the county unit (ex officio).

Because of early difficulties in determining the exact manner of disbursement of project funds and in settling the issue of volunteer liability, the project director (volunteer coordinator) was not hired until January 1983. Eight community volunteers were recruited, and training for volunteers took place in February. Seven volunteers were appointed as guardians ad litem in May, and the first visit to a child was made in May. The remaining volunteer was appointed as a guardian ad litem in June.

Objective 1: to provide pertinent information about a child's situation to the court and child welfare staff for use in permanent planning decisions. Visits made to children by guardians ad litem are documented in reports submitted to the project director. All in-person and telephone contacts with individuals related to the child's case, such as foster parent, caseworker, and child care institution director, are also documented. These reports are sent to the supervisor of the child welfare unit, who reads the reports and then gives them to the appropriate caseworker.

Guardians ad litem attended three court hearings for four children (one case involved two siblings). Guardians did not provide direct testimony on any of the cases, but information gathered by guardians was incorporated in the caseworker's presentation to the court. Consideration is being given to having the guardians present their own information during court hearings.

In addition to the written reports, there were 25 telephone contacts and 11 in-person contacts between the child welfare staff and guardians. Although guardians have not yet attended scheduled case consultation meetings, the project director and child welfare supervisor are discussing plans for guardians to attend.

The caseworker interviewed has four children for whom guardians ad litem have been appointed. Children selected to have guardians were identified by the child welfare supervisor and caseworker as having the "greatest need"--those who seemed to be experiencing the most "trauma of separation" from their parents, those with emotional problems, and those who were "acting out." The caseworker sees the guardian as (1) someone who can possibly get information a caseworker can't because of the guardian's greater "in-depth interaction" with the child and as (2) someone who will be an advocate for the child. The caseworker said that information given her by the guardians was

helpful in making placement decisions, and she felt better progress had been made in cases where a guardian had been assigned.

Objective 2: to provide pertinent information to attorneys ad litem so that their responsibilities to the children are better fulfilled. There are no specific procedures to ensure that the attorneys ad litem get copies of written reports submitted by guardians. There is verbal communication by telephone between the guardian and attorney prior to court hearings, and the guardian initiates the contact.

The attorney who was interviewed acted as attorney ad litem for 10 children, of whom three--one in institutional care and two in foster homes--had guardians ad litem. The attorney related that the juvenile judge selects attorneys ad litem by talking with new lawyers and asking them if they would have time to take on the appointments. A child will have an attorney ad litem until disposition of the case is completed, although the attorney may not always be the same one (i.e., a different person may be appointed as attorney ad litem during the course of the case).

The attorney ad litem had contact with one guardian on a case that he had had for 1 1/2 years and felt that not much new information had been given to him by the guardian. Contact with guardians on two other cases had been too minimal for him to make any assessment about the usefulness of the information he had obtained from them. The attorney felt that having the guardian as a "neutral third party" is beneficial for the child but that it is still too early to make a good assessment.

Objective 3: to educate the community about child welfare services and the needs of children in the child welfare system. Since no specific activities had been planned for community education, recruitment and training of volunteers to be guardians ad litem were operationally defined to be community education. Eight volunteers were recruited, trained, and appointed as guardians ad litem. The guardian ad litem interviewed had heard about the project through the Junior League. She had done previous volunteer work for the child welfare unit and for Family Court Services.

The project director reported that community awareness of the project has been increased through word-of-mouth communication, a newspaper article, and her appearance on a TV talk show. The director has been asked to make a presentation on the FOCAS Project to the Rotary Club, and a steering committee member will be making a presentation to the local bar association for young lawyers. Recruitment continues for additional volunteers, and six volunteers from the Junior League have expressed an interest for the fall. Steering committee activities to get funding for the FOCAS Project after the second year have also increased public awareness.

Objective 4: to increase the number of contacts with children in substitute care. Thirteen children have guardians ad litem assigned to them--eight in foster care and five in institutional child care. Twenty-four home visits have been made by the guardians--four guardians have two assigned children who reside in the same household. Each child is visited at least once every two weeks; some children are visited weekly or every 1 1/2 weeks.

The guardian ad litem interviewed had only made scheduled visits to the two children (siblings in one household) assigned to her. She called the foster parents to set up a time for the visit and talked with the foster parents as well as the children. Guardians were told by the project director to report on the child's physical and emotional condition but not the child's environmental conditions--this latter aspect was seen as strictly the responsibility of the child welfare caseworker.

There are 25 children in institutional care and 38 children in foster care who are the responsibility of the child welfare unit in Wichita County. The project director estimates that it would take 15-20 volunteers appointed as guardians ad litem to cover that number of children. The caseworker interviewed recommends that all children in substitute care be assigned guardians ad litem.

Objective 5: to identify and determine the extent of maltreatment of children in substitute care. There have been no cases of maltreatment reported by the guardians ad litem.

Objective 6: to facilitate the resolution of problems encountered by children in court-ordered care. There are no problems identified by guardians ad litem that dealt with any child's current placement. Several areas of concern identified by the guardians were brought to the attention of the caseworkers, and the following suggestions for action were made:

- following up on a child's request to locate her father,
- notifying the attorney ad litem about a child who did not want to return to her father when the attorney was trying to get the family back together again,
- encouraging that a child be given speech therapy, and
- trying to locate relatives of a child who might be able to care for the child.

LIMITATIONS

The major limitation of the evaluation is that only process information is available. Activities have been identified that indicate positive movement in achieving project objectives, but the project was not in operation long enough to allow any impact measures.

6

Coordinated Approach to Investigations and Information-Sharing

YEARLY EVALUATION REPORT

EXECUTIVE SUMMARY

The first year of the Coordinated Approach to Investigations and Information Sharing (CAIIS) Project (1) involved gathering extensive information on relevant state and federal statutes and agencies' policies and (2) developing model guidelines for investigations of institutional child abuse and neglect. The project's four objectives were successfully achieved within the time frames set for them. Second-year plans include pilot testing the model guidelines and assessing the model's impact on child abuse and neglect investigations and information-sharing.

BACKGROUND

The Texas Department of Human Resources (DHR), other state agencies, and law enforcement agencies have responsibility for investigating allegations of child abuse and neglect in facilities that provide 24-hour care. Two types of legislation are relevant to this issue: (1) general child protection statutes, both civil and criminal, and (2) laws and regulations governing the operation and monitoring of 24-hour care facilities. Because of overlap and inconsistency in the statutes, DHR and other responsible agencies have had difficulty in determining common policy and data collection needs, in setting training requirements for joint and concurrent investigations, in monitoring facilities after an abuse/neglect complaint to prevent recurrence, and in documenting that statute requirements are being met.

The CAIIS Project was proposed in order to clarify responsibilities for investigations in 24-hour care facilities and to develop a model system that will efficiently mesh the agencies' investigative functions. Agencies expressing interest in coordinating investigations, in developing policies that are consistent among all agencies, and in sharing information about the results of investigations were approached by DHR to participate in the project. A project advisory group was formed with representatives from the following:

- Texas Department of Human Resources,
- Texas Department of Mental Health and Mental Retardation,

- Texas Department of Health,
- Texas Education Agency,
- Texas Association of Licensed Children's Services,
- Texas Youth Council,
- Texas County and District Attorney's Association,
- Texas Police Association,
- Office of Youth Care Investigations,
- Sheriff's Association of Texas,
- Medicaid Fraud Control Unit (Texas Attorney General's Office), and
- Citizen Advocacy Group.

The advisory group met five times during the project year. The group provided knowledge about individual agency policies, procedures, and methods related to information-sharing and investigations; assisted in project planning; reviewed and commented on draft materials produced by the project staff; and facilitated interagency coordination and cooperation.

PURPOSES OF THE EVALUATION

Because the project year's activities consisted entirely of developing the model, no evaluation could be made of the impact of implementing the model within the present evaluation time frame. The evaluation conducted was a process one and examined the activities of the project. The major purposes of the evaluation were--

- to determine whether project objectives were met within the time frame established by the project and
- to provide summary data and information on the project activities.

RESULTS/STATUS OF OBJECTIVES

The goal of the CAIIS Project is to develop a systematic and thorough investigation process that will coordinate functions among agencies and will ensure maximum protection of children in 24-hour care. Monthly reports and materials prepared by the project staff were examined to determine how well stated objectives were met during the project year. Project activities related to the goal will be described for the four project objectives.

Objective 1: to describe and analyze relevant statutes, agency policies and procedures, and explanatory and supporting materials that agencies use. A literature search of relevant state and federal statutes pertinent to investigations and abuse in 24-hour child-caring facilities was carried out by the project staff. Agency rules and policies on investigations were collected. Statutes and information on the subjects of confidentiality and information-sharing in investigations were analyzed, and agency legal counsels were interviewed to determine their interpretations of the statutes pertaining to confidentiality and release of information.

Appendix 6-A is a summary chart of state and federal statutes affecting institutional child abuse investigations. Appendix 6-B is a summary chart of agency policies about access to and sharing of information concerning institutional child abuse investigations.

The 68th Texas Legislature was monitored for legislation passed that was relevant to the CAIIS Project. The project's staff did a summary and made a briefing on the major bills passed (see Appendix 6-C).

Objective 2: to review literature on the state of the art in investigations of reported child abuse in 24-hour care facilities. A review of the literature on institutional child abuse was carried out, and bibliographies on institutional abuse and neglect were also reviewed. Directors of demonstration projects on institutional abuse in other states were interviewed, and case studies of the projects were completed. Appendix 6-D is a bibliography on the subject of institutional abuse and investigatory procedures in 24-hour child care institutions.

Objective 3: to develop a general model for investigations of abuse and neglect in 24-hour care facilities. Based on information gathered under objectives 1 and 2 and extensive input from advisory committee members, the project staff developed a model for investigations of abuse and neglect in 24-hour care facilities (Appendix 6-E). The model includes--

- o proposed definition of institutional child abuse and neglect,
- o rights of institutionalized children,
- o guidelines for reporting institutional child abuse and neglect,
- o guidelines for composition of the investigative team,
- o guidelines for staff training, and
- o procedures for maintaining and sharing information.

Objective 4: to design a pilot test of the model's salient features. A research design and work plan for the pilot test was completed by the project staff. Two DHR regions, 6 and 11, were selected for the pilot test, taking the following criteria into consideration:

- o number and type of institutional child care facilities (public and private) and
- o interest of the region in participating in the pilot test.

The research design and work plan are presented in Appendix F.

LIMITATIONS

The major limitation of the evaluation is that only process information was available because the project year was devoted to gathering information and developing the model. An evaluation planned for the project's second year will assess the effect of implementing the model system for coordinated investigations.

APPENDIX 6-A

Federal Statutes and Regulations

STATUTE (TITLE)	USC (CITE)	REGULATIONS (CFR CITE)	MAJOR PROVISIONS
PL 93-247 Child Abuse Prevention and Treatment Act, 1974 as amended	42 USC 5101, et. seq.	45 CFR 1340 Child Abuse and Neglect Prevention and Treatment Program	-Establishes state grant programs for Child Abuse and Neglect -Institutes eligibility requirements for state discretionary grants
PL 95-266 Child Abuse Prevention & Treatment & Adoption Reform Act of 1978		45 CFR 1340	-Amends and extends PL 93-247 -Adds requirement to include sexual exploitation in the definition of Child Abuse & Neglect
PL 97-35 Omnibus Budget Reconciliation Act - 1981		45 CFR 1340	-Extends PL 93-247 through FY 1982-'83
PL 96-272 Adoption Assistance and Child Welfare Act of 1980	42 USC 670 et. seq.	45 CFR 1356-5/	-Establishes new Title IV-E program on foster care -Specifies requirements for state funds allotments
Social Security Act (PL 89-97)	42 USC §1395 et. seq.		-Major legislation authorizing the Social Security Program and other related programs
		45 CFR 205.100	-Requires designation of single state agency to administer state plans for financial assistance
	42 USC 5103b	45 CFR 1392; Subpart E - Child Abuse and Neglect Provisons Applicable Under Titles IV-A & IV-B of the Social Security Act	-Establishes state plan requirements for implementing Sec. 4(b) of PL 93-247 applicable to Title IV-A and IV-B agencies
		45 CFR 1391.3	-Pertains to the confidentiality of records under Title IV-A & IV-B
	42 USC §602	45 CFR 205.50 Safeguarding information	-Requires safeguarding of info for federally funded financial assistance under the Social Security Act
Medicare-Medicaid Antifraud and Abuse Amendments of 1977 (PL 95-142)	42 USC 1396b	45 CFR 228	-Amends the Social Security Act to provide funds for State Medicaid Fraud Control Units -Authorizes MFCU units to investigate complaints of abuse & neglect in Title XIX health care facilities

STATUTE (TITLE)	USC (CITE)	REGULATIONS (CFR CITE)	MAJOR PROVISIONS
Buckley Amendment PL 93-568 Family Educational & Rights and Privacy Act	20 USC 1232g	45 CFR 99	-Amends General Education Provisions Act -Defines procedures for access to school records of students -Defines privacy rights of parents and students
Education for Handicapped Children Act of 1975 PL 94-142	20 USC 1401-1461	34 CFR 300-333 45 CFR 121.1	-Requires state & local schools to provide a free and appropriate education for all handicapped children
Developmentally Disabled Assistance & Bill of Rights PL 94-103	42 USC 6001 et. seq.	45 CFR 1385	-Requires a state advocacy program for the developmentally disabled -Details Rights of Developmentally Disabled -Makes funds available to states to prepare and implement plan for me the needs of the developmentally disabled

STATUTE (TITLE)	USC (CITE)	REGULATIONS (CFR CITE)	MAJOR PROVISIONS
Title XIX of Social Security Act	42 USC 1396		-Establishes Medicaid Program
	42 USC 1302	42 CFR 456	-Establishes the requirement of Utilization Review Teams for Medicaid and Medicare facilities -Requires the monitoring of quality of services
Vocational Rehabilitation Act of 1973, PL 93-112 Sec. 504	29 USC §794	45 CFR 84	-Prohibits discrimination in programs and activities recieving federal funds -Establishes national advisory committee -Sec. 504 (29 USC 706): prohibits discrimination on the basis of handicap in programs benefiting from federal financial assistance
		45 CFR 84	-Requires reporting of denial of food or medical care to handicapped infants
Juvenile Justice and Delinquency Prevention Act of 1974 (PL 95-115)	42 USC §5601		-Establishes requirements for juvenile detention facilities
Juvenile Justice Amendments of 1980 (PL 96-509)	42 USC 5601		-Requires state plans for federal grants -Requires states accepting federal funding to assure that no juveniles are detained in adult jails by 1985 -Requires confidentiality of juvenile records §5639
Crime Control Act of 1968		28 CFR 20.1; 20.25, 20.3(b)	-Requires protection of privacy of juvenile records
Federal Freedom of Information Act of 1974 (PL 93-529)	5 USC 552		-Affects federal agencies only, establishes model for open access to government records and confidentiality protections
General Education Provisions Act PL 90-247			-Authorizes federal funds and state requirements for educational systems

STATE STATUTES AND REGULATIONS

STATUTE	V.A.C.S. CITE	TEXAS ADMINISTRATIVE CODE CITE	MAJOR PROVISIONS
34 TFC Child Abuse Reports	Texas Family Code		-Defines Child Abuse & Neglect (34.01) -Designates TDHR and law enforcement to receive and investigate reports (34.02) -Requires all persons to report suspected child abuse (34.01) -Establishes confidentiality protections (34.011)
42 HRC Regulation of Child Care Facilities	Human Resources Code		-Authorizes/requires TDHR to license/certify child care facilities (exempts TYC)
51 TFC Delinquent Children and Children in Need of Supervision	Texas Family Code		-Establishes authority for county regulation of juvenile detention facilities by juvenile boards -Requires annual inspections by juvenile judge -Outlines requirements for accessing juvenile records (Ch. 51.15)
HRC - Chapter 75 Texas Juvenile Probation Commission	Human Resources Code		-Establishes TJPC -Authorizes state to fund local juvenile boards -Requires standards for juvenile boards
HRC - Chapter 61 Texas Youth Council	Human Resources Code		-Establishes TYC
HRC - Chapter 32.023 Texas Medical Assistance Program	Human Resources Code		-States that interagency agreements under the Medical Assistance Program are exempt from Art. 4413 - Interagency Cooperation Act
HRC - Chapter 22.002	Human Resources Code		-Establishes TDHR as the single state agency for Title XIX programs -Authorizes interagency agreements for implementing Title XIX -Designates DHR as the agency to administer Title IV-A & IV-B funds
HRC - Chapter 111; Texas Rehabilitation Commission			-Establishes TRC, sets out powers and duties of agency -Establishes criteria for using criminal record information
Convalescent and Nursing Homes and Related Institutions Act (1953)	Art. 4442c	25 TAC 145 Part 1: Long Term Care	-Establishes the Health Department as the licensing authority for nursing homes

STATUTE	V.A.C.S. CITE	TEXAS ADMINISTRATIVE CODE CITE	MAJOR PROVISIONS
Texas Hospital Licensing Law	Art. 4437f		-Establishes TDH as the licensing agency for public and private hospitals
Surveys & Inspections of Health Care Facilities (1977)	Art. 4437h		-Requires annual public hearing on each nursing home -Requires one unannounced inspection visit per year -Requires involvement of public advocacy groups in inspections of nursing homes
Texas Mental Health Code (1957)	Art. 5541-1 et. seq.		-Requires licensure of private mental hospitals -Authorizes promulgation of rules to implement statute -Establishes patient rights (§86) -Defines disclosure of information criteria (§87)
Texas Mental Health & Mental Retardation Act of 1965	Art. 5547-201 et. seq.	25 TAC 401	-Creates TDMHMR -Authorizes the establishment of Community MHMR Centers
Mentally Retarded Persons Act of 1977	Art. 5547-300		-Requires the establishment of Public Responsibility Committees with the authority to receive and investigate complaints -Defines patient rights and directs TDMHMR to adopt rules to safeguard these rights
Confidentiality of Mental Health Information of Individuals (1979)	Art. 5561(h)		-Establishes confidentiality privilege between Mental Health patients and professionals -Provides six exceptions to confidentiality privilege including to government agencies when disclosures of information are required or authorized by law
Texas Medical Practices Act	Art. 4495(b) §5.08 (affects Art. 5561h)	22 TAC 161	-Makes physician/patient communication confidential
	Art. 46b2, Sec. 5(b)		-Allows state funds to be used as payments for foster care by DHR
	Art. 495e		
Administrative Procedure & Texas Register Act 1975	Art. 6252-13a		-Requires public participation in rulemaking process, i.e., public hearing and comment period -Requires formal publication and adoption of rules by state agencies
Texas Open Meeting Act - 1967	Art. 6252-17		-Requires specified meetings of public/government bodies to be announced and open to the public

STATE STATUTES AND REGULATIONS

STATUTE	V.A.C.S. CITE	TEXAS ADMINISTRATIVE CODE CITE	MAJOR PROVISIONS
Texas Open Records Act - 1973	Art. 6252-17a	25 TAC 403.181	-Makes public all information collected by government agencies with specified exceptions -Establishes procedure for requesting Attorney General decisions regarding what information must be disclosed
Texas Education Code	Texas Education Code - General		-Establishes TEA as state agency designated to monitor and regulate education services in the state -States that the Texas Education Code does not apply to TDMH/MR or to TYC except as noted for special programs
	Texas Education Code Sec. 16.104	89 TAC 89.201 Subchapter G	-Sets out TEA rules for implementing special education programs
Code of Criminal Procedure Chapter 18.021	Texas Code of Criminal Procedure		-Governs issuance of search warrants to photograph an injured child
Jail Standards	Art. 5115	37 TAC 251-301	-Defines standards for safe and suitable jails
TFC Sec. 11.17	Texas Family Code		-Assures confidentiality of consummated adoption records
Non-discrimination Against Handicapped	Human Resources Code (HRC) Sec. 121.003 [formerly Art. 4419e §3(f)]		-Requires all public transportation and facilities to be accessible to the handicapped
Rights and Responsibilities of the Handicapped	Human Resources Code Title 8 Sec. 121.003		-Prohibits discrimination against handicapped in public facilities in the state

APPENDIX 6-B

Information-Sharing in Institutional
Abuse/Neglect Investigations

INFORMATION SHARING IN INSTITUTIONAL ABUSE/NEGLECT INVESTIGATIONS

AGENCY	INSTITUTIONAL ABUSE/NEGLECT INVESTIGATIONS RELEASE OF INFORMATION POLICIES	OFFICE FOR QUESTIONS/ PROBLEMS RE: RELEASE OF INFORMATION
TYC	*Written records on children subject to TYC control are not public (V.A.C.S., Art. 5143d, Sec. 16(c)). *All files or records of TYC relating to individual students are open to inspection only by: -the professional staff or consultants of the agency or the institution; -the judge, probation officers, and professional staff or consultants of the juvenile court; -an attorney for the child; or -with leave of the juvenile court, any other person, agency, or institution having a legitimate interest in the work of the agency or institution. (Chpt. 51.14, Family Code) *Identifying information is not given to other state agencies, but TYC may use such information received from other state agencies or offices (TYC General Operating Policies: Records, and Reports). *TYC can furnish information relating to child abuse to O.Y.C.I. (A.G. Opinion H-660).	Raquel Medina, Records Custodian TEXAS YOUTH COUNCIL, 8900 Shoal Creek Blvd. Austin, Texas (512) 452-8111
TRC	*Client information can be released to official personnel investigating child abuse allegations. (Interview with Ed Austin, TRC General Counsel) *Except in an emergency, requests for information must be in writing and must state that the information is required for an official investigation. (TRC Rehabilitation Services Manual, Confidentiality of Client Records and Information)	Edward W. Austin Office of General Counsel TEXAS REHABILITATION COMMISSION 118 East Riverside Austin, Texas 512-445-8124
TEA	*TEA is not directly involved with institutional abuse/neglect investigations. Each independent school district makes decisions about what information is shared and with whom using the regulations for Family Educational Rights and Privacy Act (FERPA). (Interview with Pat Whelan, TEA Assistant General Counsel) *Information may not be disclosed without written consent of student's parents except to: -Other school officials -Officials of another school in which the student seeks to enroll -Authorized federal government representatives and state educational authorities -To state and local officials to whom information is specifically required to be reported as required by state statute adopted prior to 11/19/74 -Organizations conducting studies to develop, validate or administer predictive tests, administer student and programs and improve instruction -Accrediting organizations -To comply with a judicial order or subpoena -To appropriate parties in a health or safety emergency when information is necessary to protect the health or safety of the student or other individual (FERPA Regulations). *If admission to the school cannot be obtained, then, the juvenile court or the district court can order the person in charge to allow entrance for the interview and the investigation (Chpt. 34.05, Family Code).	*Pat Whelan Assistant General Counsel TEXAS EDUCATION AGENCY 201 East 11th Street Austin, Texas 512-475-3272 *Local Schools & their Legal Counsels

TDHR
CAIIS Project
March, 1983

INFORMATION SHARING IN INSTITUTIONAL ABUSE/NEGLECT INVESTIGATIONS

AGENCY	INSTITUTIONAL ABUSE/NEGLECT INVESTIGATIONS RELEASE OF INFORMATION POLICIES	OFFICE FOR QUESTIONS/ PROBLEMS RE: RELEASE OF INFORMATION
TDH	*Department of Health, Medicaid Fraud Unit and law enforcement personnel are the only persons who have access to children's records in ICF Facilities (Interview with Jerry Bryant, Quality Standards Division, and Robert Elrod, Administrator of Training and Complaints). *Information on the central registry is provided to the public (Procedures on Long Term Care Facilities) *Copies of investigation reports of verified cases of abuse or neglect or cases not verified as unsubstantiated are furnisheo to the following: -The appropriate court, district attorney and law enforcement agency -other agencies or individuals which DOH considers appropriate to the investigative purposes of protecting the resident (e.g., DHR) -the Institution (receives a de-identified report) -the complainant (receives a summary of report) (Procedures on Long Term Care Facilities.)	Barbara Crenwelge Special Projects Administrator Quality Standards Div. Bureau of Long Term Care DEPARTMENT OF HEALTH 1100 W. 49th Street Austin, Texas 512-458-7611
JUVENILE PROBATION	*Files relating to a child who is a party to a proceeding under Title 3, Family Code, are open to inspection only by: -the judge, probation officers, and professional staff or consultants of the juvenile court; -an attorney for a party to the proceeding; -a public or private agency or institution providing supervision of the child by arrangement of the juvenile court, or having custody of the child under juvenile court order; or -with leave of juvenile court, any other person agency, or institution having a legitimate interest in the proceeding or in the work of the court. (Chpt. 51.14, Family Code). *There are no written policies regarding what information can be shared between juvenile probation and other agencies in child abuse investigations (Carolyn Donalson, General Counsel for Juvenile Probation Commission.)	Local Juvenile Boards
DHR	*Records may be disclosed to parents, the child, or their legal representative (CPS Handbook 7113) *Name of complainant is confidential and excepted from disclosure to client or public (A.G. Open Records Decision #49) *Protective Services records pertaining to child abuse and neglect are excepted from disclosure to public (A.G. Open Records Decision #73). *A copy of the CPS report of investigation is sent to OYCI (10/13/73 Resolution, from D. B. #9) *Information regarding reports that public school officials have abused/neglected a child and reports alleging abuse/neglect in facilities under auspices of TEA, DOH, MHMR, TYC and TRC is shared with involved agencies. (CPS Handbook 7223.11 and Resolution from D.B. #9) *Law enforcement is notified of all reports the department receives involving child abuse/neglect (Chpt. 34.02, Family Code.)	John Townsend Assistant Commissioner for Coordination DEPARTMENT OF HUMAN RESOURCES 706 Banister Lane Austin, Texas 512-441-3355

TDHR
CAIIS Project
March, 1983

INFORMATION SHARING IN INSTITUTIONAL ABUSE/NEGLECT INVESTIGATIONS

AGENCY	INSTITUTIONAL ABUSE/NEGLECT INVESTIGATIONS RELEASE OF INFORMATION POLICIES	OFFICE FOR QUESTIONS/ PROBLEMS RE: RELEASE OF INFORMATION
SCHOOL FOR DEAF	*DHR is notified of abuse/neglect allegations (School for Deaf Policy on Student Welfare; Child Abuse). *DHR CPS staff has access to resident's records when information contained in them is necessary to carry out investigation (Interview with David Ryan, Legal Counsel for the School for the Deaf.)	Mary Jane Marks IEP Facilitator Texas School for the Deaf East Campus 601 Airport Blvd. Austin, Texas 512-385-1001
SCHOOL FOR BLIND	*Personally identifiable information in education records may be released without the written consent of the student's parents to appropriate persons who, in an emergency, must have such information in order to protect the health or safety of the student or other person (Administrative Regulations, Student Records, School for Blind). *DHR is notified of abuse/neglect allegations (Administrative Handbook Student Safety: Child Abuse). *DHR staff has access to resident's records when information contained in them is necessary to carry out investigation (Interview with Ken Miller, Director of Programs, School for the Blind).	Ken Miller Director of Programs Texas School for the Blind 1100 W. 45th Street Austin, Texas 512-454-8631
MHMR	*With regard to records of Mentally Retarded clients: -The content of their records may be disclosed to personnel legally authorized to conduct investigations concerning complaints of abuse or denial of rights (Rules of the Commissioner Governing the Disclosure of Client Identifying Information contained in Records of MR clients). -"Personnel legally authorized to conduct investigations" are MHMR and DHR staff only (interview with Kent Johnson, MHMR Legal Counsel.) *With regard to records of Mental Health clients: -DHR CPS staff can have access to information in client records necessary to carry out an investigation of child abuse/neglect (interview with Kent Johnson and Rules of the Commissioner Governing Disclosure of Client Identifying Information contained in Records of Mental Health and Drug and Alcohol Abuse Clients). -Directives in Section 34.01 of the Family Code (requiring all persons to report suspected abuse or neglect) must be carried out without regard to provisions of Article 5547-87 V.T.C.S. which requires confidentiality of hospital records (A.G. Opinion #494). *With regard to Drug and Alcohol Abuse clients: -Information in client records cannot be released except with the client's permission or court order (Interview with Kent Johnson and Rules of the Commissioner Governing the Disclosure of Client Identifying Information contained in records of Mental Health and Drug and Alcohol Abuse Clients). *Policies implementing Art. 5561h, Confidentiality of Mental Health Information of Individuals, V.A.C.S. are in the process of being developed.	Office of Client Services & Rights Protection 909 W. 45th Street Austin, Texas 512-465-4546 in cooperation with MHMR Legal Div. 512-465-4591

APPENDIX 6-C

Selected Legislation,
68th Texas Legislature

SELECTED LEGISLATION PASSED IN THE 68TH LEGISLATURE

(Regular Session)

HB - 0102 — Relating to inspections of convalescent homes, nursing homes, and related institutions.

Amends Article 4442c, Sec. 7: "Rules, Regulations and Enforcements" to provide that:

-minimum licensing standards may address staff ratios and qualifications for all patient care personnel, staff training requirements, and diet and nutrition.

-two unannounced inspections must be made each year to every facility;

-all personnel administering medications must complete a state approved training program in medication administration;

-grading of nursing homes will, under specified conditions, include a superior grade and this grade may be advertised; and

-each resident must have one medical examination per year.

HB - 0103 — Relating to a repeal of the requirement that state agencies adopt a code of conduct for agency employees who inspect and survey health care facilities.

Repeals Sections 5 and 6, Chap. 387, Acts of the 65th Legislature, Regular session, 1977 (Art. 4437h VTCS).

HB - 0225 — Relating to unannounced inspections of nursing and convalescent homes; providing a penalty.

Amends Article 4442c, the Convalescent and Nursing Homes and Related Institutions Act, to provide a penalty (Class B misdemeanor) for the disclosure of the time, date or any other information about an inspection of a nursing home facility.

HB - 0358 — Relating to child abuse investigations.

Amends Sec. 34.05c of the Family Code to provide that:

-the required interview conducted with the child to investigate child abuse or neglect reports may be conducted at any reasonable time and may take place at the child's school.

Amends the Texas Open Records act (Art.6252-17a) to allow persons conducting a child abuse investigation required by Section 34.05 of the Texas Family Code to have access to student records at educational institutions.

HB - 0475 Relating to access to certain juvenile records.

Amends Section 51.14(b) of the Texas Family Code to allow the Texas Department of Corrections access to certain juvenile records for the purpose of maintaining statistical records of recidivism, and for diagnosis and classification.

HB - 1726 Relating to the rights of the elderly.

Adds a chapter on the Rights of the Elderly (defined as age 55 years of age or older) to Title 6 of the Human Resources Code. Elderly rights include:

-the right not to be physically or mentally abused or exploited.

-the right not to be physically or chemically restrained except under certain specified conditions.

Facilities covered by this act are required to develop procedures for accepting complaints and recommendations by elderly persons and for assuring a response to these complaints.

HB - 1753 Relating to the administration of medications in nursing homes.

Amends Article 4442c, the Convalescent and Nursing Home and Related Institutions Act to require individuals who administer medications to institutional residents to have a permit issued by the Texas Board of Health. The Board is required to adopt rules establishing minimum requirements for issuing permits and curricula for training programs on administration of medications. Establishes a penalty (Class B misdemeanor) for administering medication without a permit.

HB - 2271 Relating to coordination of activities of state agencies related to health care.

Amends Article 4437h, Surveys and Inspections of Health Care Facilities, to require that the TDHR, the TDMHMR and the Texas Commission on Alcoholism, do not duplicate procedures or subject health care facilities to duplicative rules and regulations. Exempts certain hospital facilities which have

obtained accreditation from the Joint Commission for the Accreditation of Hospitals, the American Osteopathic or another natural accreditation body, from additional licensing inspections under the Texas Hospital Licensing Law.

SB - 0711 Relating to the establishment of the Texas Health and Human Services Coordinating Council.

Amends the Human Resources Code to create the "Texas Health and Human Services Coordinating Council." Council membership includes: the governor; the lieutenant governor; the Speaker of the House; the chairman of the Boards of Human Resources, Health, Mental Health and Mental Retardation, and Education; two Senate and two House members; three public members; and a state agency representative. The Council is granted the authority to:

(1) establish and maintain a comprehensive central data base of services;

(2) conduct and contract for significant human services studies;

(3) serve as primary state resource in human services planning and coordination;

(4) analyze relationships and coordinate efforts of federal, state, and local entities;

(5) provide a central information and referral source;

(6) review existing and proposed federal actions and policies to determine impact on services in Texas and to make recommendations to the governor and legislature;

(7) provide advice to public and private entities regarding human services; and

(8) conduct regular and comprehensive reviews and analyses of human services policies and make recommendations to the governor and legislature.

SB - 0861 Relating to the responsibility of TDHR to provide protective services to elderly and disabled persons.

Amends Chap. 48 of the Texas Human Resources Code to expand the coverage of adult protective services to disabled persons. A section by section analysis follows.

Section 1. Amends Chapter 48, Human Resources Code, as follows:

Sec. 48.001. Expands purpose statement to include disabled persons.

Sec. 48.002. Updates existing definitions of exploitation, protective services, and protective services agency; provides for "department" to continue to be defined as the Texas Department of Human Resources rather than the Department on Aging; provides for "disabled person" to mean a person with a mental, physical, or developmental disablity who is between 18 and 65 years of age.

Sec. 48.036. Expands the mandatory reporting law of suspected abuse, neglect, or exploitation to include disabled persons.

Sec. 48.037. Directs department to initiate prompt and thorough investigations of reported abuse of disabled persons within 24 hours of receipt of report.

Sec. 48.038. Updates provisions for implementing investigation to include disabled persons.

Sec. 48.039. Requires court to appoint attorney ad litem to represent disabled clients in proceedings brought by the department under this chapter.

Sec. 48.056. Expands authorization of protective services agencies to provide services to disabled persons.

Sec. 48.059. Enables disabled persons to receive voluntary protective services.

Sec. 48.060. Prohibits interference with provision of voluntary protective services to a disabled person.

Sec. 48.061. Expands provisions to authorize the department to petition for emergency orders for services for disabled persons.

APPENDIX 6-D

CAIIS Project Bibliography

"Coordinated Approach to Investigations
and Information-Sharing"

PROJECT BIBLIOGRAPHY

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Child Protective Services Branch

March, 1983

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APPENDIX 6-E

Proposed Model Guidelines
for Investigations

PROPOSED MODEL GUIDELINES FOR CHILD ABUSE AND NEGLECT INVESTIGATIONS IN INSTITUTIONAL CHILD CARE FACILITIES

Texas Department of Human Resources
Child Protective Services
August 15, 1983

PROPOSED MODEL FOR CHILD ABUSE AND NEGLECT INVESTIGATIONS IN INSTITUTIONAL CHILD CARE FACILITIES

PREFACE

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A. Agency Statistics

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PREFACE

The model for child abuse/neglect investigations in institutional child care facilities is designed to meet the following objectives:

(1) clarify respective roles and responsibilities in conducting institutional abuse and neglect investigations;

(2) provide a comprehensive and consistent set of guidelines for conducting investigations;

(3) provide guidance to 24-hour facilities which care for children, agencies which regulate these facilities, and law enforcement in developing institutional abuse/neglect investigation procedures, and

(4) improve the statistical data base and interagency information sharing on institutional abuse investigations.

The model is divided into five areas: the rights of institutionalized children; the regulatory framework; model guidelines for conducting institutional abuse and neglect investigations; staff training; and maintenance and sharing of information and statistics on institutional abuse and neglect.

LIST OF ABBREVIATIONS

CAIIS	Coordinated Approach to Investigations and Information Sharing Project
CPS	Child Protective Services
HRC	Human Resources Code (Texas)
ICF/MR	Intermediate Care Facilities for the Mentally Retarded
ICF/SNF	Intermediate Care/Skilled Nursing Facilities
JCAH	Joint Commission for the Accreditation of Hospitals
MFCU	Medicaid Fraud Control Unit
NCCAN	National Center on Child Abuse and Neglect
OYCI	Office of Youth Care Investigation (Texas)
PRC	Public Responsibility Committee (TDMHMR)
TDH	Texas Department of Health
TDHR	Texas Department of Human Resources
TDMHMR	Texas Department of Mental Health and Mental Retardation
TEA	Texas Education Agency
TRC	Texas Rehabilitation Commission
TFC	Texas Family Code
TYC	Texas Youth Commission
V.A.C.S.	Vernon's Annotated Civil Statutes (Texas)

I. RIGHTS OF CHILDREN IN 24-HOUR CARE FACILITIES

It is important to recognize the link between the rights of children in out-of-home care and the determination of whether child abuse or neglect has occurred in a 24-hour care facility. It is the belief of the project that a clear delineation of expectations regarding the rights of institutionalized children is a prerequisite to the identification of abusive and neglectful treatment.

Children in 24-hour care facilities have the following rights:

A. INDIVIDUAL RIGHTS

- °Right to seek legal counsel
- °Right to access to an administrative grievance procedure
- °Right to a reasonable opportunity for private space and time
- °Right to confidentiality of records
- °Right to confidentiality of mail and personal communications
- °Right to equal access to available services regardless of race, religion, age, sex, or handicapping condition

B. PROTECTION AND SUSTENANCE RIGHTS

- °Right to food, shelter and consistent care and supervision
- °Right to freedom from harm, abuse or neglect or threats of harm, abuse and neglect
- °Right to prompt medical care and treatment and preventative care and treatment
- °Right to own personal property within reasonable limits
- °Right not to be arbitrarily moved from one substitute care situation to another
- °Right to exercise reasonable individual choices and preferences and to express opinions

C. RIGHTS TO ACHIEVEMENT OF DEVELOPMENTAL GOALS CONSISTENT WITH ABILITIES

- °Right to opportunity for the development of socialization skills
- °Right to opportunity for an education and cognitive development

D. THERAPEUTIC AND PROTECTIVE INTERVENTION RIGHTS

- °Right to live in the least restrictive environment
- °Right to freedom from unnecessary chemical or physical restraint
- °Right to an individualized treatment/service plan
- °Right to participate in the development of treatment/service plan

II. REGULATORY FRAMEWORK

A. TYPES OF INSTITUTIONAL CHILD ABUSE/NEGLECT INVESTIGATIONS

CATEGORY	CIVIL	CRIMINAL	ADMINISTRATIVE
AGENCIES INVOLVED	•Child Protective Services (TDHR) •Agency and Institutional Licensing (TDHR) •OYCI •TDMHMR •TDH •TYC •Accrediting Agencies	•Law Enforcement •Attorney General's Medicaid Fraud Unit •Investigator General's Office (TDHR) •County and district attorney	•Internal agency investigation •Public review bodies
PURPOSE/GOAL	•Protect child(ren) residing in institutional care facilities •Maintain minimum quality of services (licensing) •Maintain above minimum level of services (accreditation) •Oversight	•Enforce state criminal laws •Determine individual(s) responsibility for alleged abuse/neglect •Compile criminal evidence •Bring charges against alleged perpetrators of abuse/neglect	•Revise agency policies and procedures •Make decisions on personnel/ training •Assure/Assess quality of services •Assure public accountability

B. INSTITUTIONAL CHILD ABUSE AND NEGLECT INVESTIGATIONS AGENCY ROLES AND REGULATIONS

TYPE OF FACILITY	CHILD ABUSE/NEGLECT INVESTIGATING AGENCY (CIVIL)	REGULATIONS	INVESTIGATION PROCEDURES
1. Foster Homes and Foster Group Homes			
Independent	*TDHR CPS *TDHR A & I Licensing *OYCI	*TDHR Minimum Standards for Foster Family Homes *TDHR Minimum Standards for Foster Group Homes, Part 2	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution
Agency Sponsored			
*Child Placing Agencies	*TDHR CPS *TDHR A & I Licensing *OYCI	*TDHR Minimum Standards for Child Placing Agencies, Appendix 5 *TDHR Minimum Standards for Foster Group Homes, Part 1	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution
*TYC	*TYC *OYCI	*TYC Minimum Foster Care Standards	*TYC General Operating Procedures and Policy Manual *OYCI Resolution
*TDMHMR	*TDHR CPS *TDHR A & I Licensing *OYCI	*TDHR Minimum Standards for Child Placing Agencies, Appendix 5 *TDHR Minimum Standards for Foster Group Homes, Part 1	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution

B. INSTITUTIONAL CHILD ABUSE AND NEGLECT INVESTIGATIONS AGENCY ROLES AND REGULATIONS

TYPE OF FACILITY	CHILD ABUSE/NEGLECT INVESTIGATING AGENCY (CIVIL)	REGULATIONS	INVESTIGATION PROCEDURES
*TDHR	*TDHR CPS *TDHR A & I Licensing *OYCI	*TDHR Minimum Standards for Child Placing Agencies, Appendix 5 *TDHR Minimum Standards for Foster Group Homes, Part 1	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution
2. Institutions for the Mentally Retarded			
Private facilities serving mentally retarded children	*TDHR CPS *TDHR A & I Licensing *OYCI	*TDHR Minimum Standards for Institutions Serving the Mentally Retarded	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution
State schools (public)	*TDH (Utilization Review Team) *TDMHMR (PRC, Client Abuse Committee and/or Consultant Investigators) *OYCI	*TDH Licensing Standards for intermediate care facilities for the Mentally Retarded *TDHR Standards for participation ICF/MR	*TDH Complaint Investigation Procedures *TDMHMR Rules of the Commissioner *OYCI Resolution
Private facilities serving the mentally retarded (Title XIX certified, ICF-MR)	*TDH (Utilization Review Team) *OYCI	*TDH Minimum licensing standards for facilities serving the Mentally Retarded citizens of Texas *TDHR Standards for participation ICF/MR	*TDH Complaint Investigation Procedures *OYCI Resolution

B. INSTITUTIONAL CHILD ABUSE AND NEGLECT INVESTIGATIONS
AGENCY ROLES AND REGULATIONS

TYPE OF FACILITY	CHILD ABUSE/NEGLECT INVESTIGATING AGENCY (CIVIL)	REGULATIONS	INVESTIGATION PROCEDURES
3. Institutions for the Mentally Ill			
Private facilities for emotionally disturbed children	*TDHR CPS *TDHR A & I Licensing *OYCI	*Minimum Standards for Residential Treatment Centers *Minimum Standards for Therapeutic Camps	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution
State Hospitals (public)	*TDMHMR *OYCI	*JCAH Standards for Child, Adolescent, and Adult Psychiatric, Alcoholism, and Drug Abuse Facilities	*TDMHMR Rules of the Commissioner *OYCI Resolution
Private psychiatric hospitals	*TDMHMR *OYCI	*TDMHMR rules governing the licensing of private mental hospitals	*TDMHMR Rules of the Commissioner *OYCI Resolution
4. Basic Child Care Institutions			
Private child care facilities	*TDHR CPS *TDHR A & I Licensing *OYCI	*TDHR Minimum Standards for Institutions Providing Basic Child Care	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution

B. INSTITUTIONAL CHILD ABUSE AND NEGLECT INVESTIGATIONS AGENCY ROLES AND REGULATIONS

TYPE OF FACILITY	CHILD ABUSE/NEGLECT INVESTIGATING AGENCY (CIVIL)	REGULATIONS	INVESTIGATION PROCEDURES
Private Halfway Houses	*TDHR CPS *TDHR Licensing *OYCI	*TDHR Minimum Standards for Halfway Houses	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution
TYC Halfway Houses	*TYC *OYCI	*None	*TYC General Operating Procedures and Policy Manual *OYCI Resolution
Emergency Shelters	*TDHR CPS *TDHR A & I Licensing *OYCI	*TDHR Minimum Standards for Emergency Shelters	*TDHR CPS Handbook *TDHR Licensing Handbook *OYCI Resolution
5. Nursing Homes	*TDH *OYCI	*TDHR Standards for participation ICF/SNF *TDH Minimum Licensing Standards for Nursing Homes	*TDH Complaint Investigation Procedures *OYCI Resolution
6. Children's Correctional Institutions			
TYC Training Schools	*TYC *OYCI	*Standards in process of development	*TYC General Operating Procedures and Policy Manual *OYCI Resolution

B. INSTITUTIONAL CHILD ABUSE AND NEGLECT INVESTIGATIONS AGENCY ROLES AND REGULATIONS

TYPE OF FACILITY	CHILD ABUSE/NEGLECT INVESTIGATING AGENCY (CIVIL)	REGULATIONS	INVESTIGATION PROCEDURES
Juvenile Detention Facilities	*County Juvenile Boards/ Courts	*Standards in process of development	*Texas Family Code, Section 51.12
7. Others			
State School for the Deaf	*TDHR CPS	*None	*TDHR CPS Handbook
State School for the Blind	*TDHR CPS	*Accredited by the National Accreditation Council for Schools and Agencies Serving the Blind and Visually Handicapped *Southern Association of Colleges and Schools	*TDHR CPS Handbook
Youth Camps	*TDHR CPS	*TDH Texas Youth Camp Safety and Health Rules and Regulations	*TDHR CPS Handbook

C. DEFINITIONS

1. "Institution" means a facility that provides care for a child who is not related by blood, marriage or adoption to the owner or operator of the facility for 24 hours a day, whether or not the facility is operated for profit or charges for the services it offers. This includes, but is not limited to, foster homes, foster group homes, institutions for the mentally retarded and mentally ill, basic child care institutions, nursing homes, children's correctional facilities, the School for the Deaf, the School for the Blind, and youth camps.

2. "Child abuse" means the physical or mental injury, sexual abuse or exploitation, negligent treatment, or maltreatment of a child under the age of eighteen by a person responsible for the child's welfare under circumstances indicating harm or threatened harm to the child's health or welfare. The term encompasses both acts and omissions on the part of the responsible person.

   a. "Physical abuse" means non-accidental physical injury to a child. Examples of physical abuse include, but are not limited to: burns, fractures, bruises, poisoning, exposure, and starvation.

   b. "Mental/emotional abuse or maltreatment" means treatment of a child which results in impaired psychological growth and development. Examples of mental/emotional abuse or maltreatment include, but are not limited to, verbal abuse, excessive demands on a child's performance, and threats of injury.

   c. "Sexual abuse of a child" means the commission of any sexually oriented act or practice by a person responsible for the child's health or welfare; including, but not limited to: sexual assault, incest, fondling, sexual stimulation, sodomy, and sexual molestation.

   d. "Sexual Exploitation" includes, but is not limited to, allowing, permitting, or encouraging a child to engage in prostitution; and allowing, permitting, encouraging or engaging in the obscene or pornographic photographing, filming, or depicting of a child, as those acts are defined by State law.

3. "Institutional child abuse and neglect" means a situation of child abuse or neglect in which the person responsible for the abuse is a foster parent or the employee of a public or private residential child care institution or organization or situations in which the suspected abuse occurs as a result of the institution's practices, policies or conditions.

4. "Exploitation" means the involvement of a child in illegal or immoral activities or forced workloads on a child to an extent that interferes with the child's health or education.

5. "A person responsible for a child's health or welfare" in an institution (as defined above) includes, but is not limited to, the child's guardian, foster parent, an employee of a public or private residential home, facility or organization.

6. "Immediately" means as soon as possible and in no cases longer than twenty-four hours.

III. MODEL GUIDELINES FOR PILOT TESTING

A. REPORTING OF INSTITUTIONAL CHILD ABUSE AND NEGLECT

1. General Requirements

a. Responsibility to Report

°Any person who has cause to believe that a child living in a 24-hour care facility has been, will be or may be abused or neglected must immediately make a report to any state or local law enforcement agency and to TDHR (TFC: Chap. 34).

°All reports received by any local or state law enforcement agency shall be referred to TDHR. TDHR shall notify the appropriate state or local law enforcement agency of any report it receives other than from a law enforcement agency.

°An oral report must be made immediately upon learning of the alleged abuse or neglect, and a written report shall be made within five days to the same agency or department.

b. Content of Initial Reports

°The initial report to law enforcement and to TDHR must include, to the extent available, the following information*:

-name(s), address(es), age(s), and location(s) of the alleged victim(s)
-identity of the suspected perpetrator
-identity of witness(es)
-nature, extent and cause of the alleged victim(s) injuries
-whether or not the alleged victim(s) has been examined/treated by a physician or other medical personnel
-assessment of immediate possible danger to alleged victim(s)
-clarification of complainant's desire to be notified of the findings of the investigation
-name(s) and address(es) of the alleged victim's parents, guardian or managing conservator
-name(s) and address(es) of the person(s)/facility responsible for the care of the child when the alleged abuse/neglect occurred

*In cases in which a law enforcement authority is involved in the investigation, reporting and releasing of information shall be coordinated with the appropriate office or authority.

c. Assignment of Reports

°Each agency, including law enforcement authorities, that has the responsibility for investigating institutional child abuse or neglect reports must designate certain persons or an office within the agency to receive reports of alleged child abuse and neglect.

2. Reporting to Other Agencies

a. Notification to Other Agencies

°Agencies receiving reports of institutional child abuse or neglect must immediately notify the following investigative agencies and authorities when appropriate:

-TDHR
-Law Enforcement
-Office of Youth Care Investigation
-Texas Attorney General's Office, Medicaid Fraud Control Unit (if report involves Title XIX facilities).

°When TDHR receives a report alleging institutional child abuse or neglect in a facility regulated by TDH, TDMHMR, or TYC, the designated person or office in the regulating agency must be notified immediately. A copy of the intake report must be forwarded to the appropriate agencies within 3 working days.

b. Notification within TDHR

°When TDHR Child Protective Services receives a report of alleged abuse or neglect in a facility regulated by TDHR, Agency and Institutional Licensing Division must be notified within one working day.

°If Agency and Institutional Licensing receives the initial report, Child Protective Services must be notified immediately.

3. Status Reports

TDHR

°The joint investigation conducted by TDHR's Child Protective Services and Agency and Institutional Licensing staff must be concluded within 30 days of the date of the intake report.

°When the investigation cannot be concluded within 30 days, licensing and CPS staff must notify each other of the status of the investigation and estimate when their investigation will be complete. A status report shall be made at 30 day intervals until the investigation is complete.

4. Final Reports

a. Content of Final Reports

°Each agency that investigates child abuse or neglect in 24-hour care facilities must make a written report which includes, but it is not limited to, the following information:

-a summary of the complaint
-identification of people interviewed during the investigation, including name and relationship to child or facility
-narrative of the investigation, including all pertinent information, such as names, dates, quotes; documents received as exhibits, such as protective services report or police reports
-conclusion, including an evaluation of data and recommendations and a statement of whether abuse and/or neglect was confirmed
-identity, if determined, of the person or persons responsible for the alleged abuse or neglect
-a statement indicating whether the complainant was notified of the findings of the investigation
-final disposition of the complaint

b. Submission of Final Reports

°Each agency that investigates child abuse or neglect in institutional facilities shall submit a copy of this final investigation report (which includes all information detailed above) within 10 calendar days after completion of the investigation to the following agencies:

(1) the Texas Department of Human Resources;
(2) the Office of Youth Care Investigation; and
(3) the Attorney General's Office, Medicaid Fraud Control Unit (if appropriate).

°In cases in which the local district attorney's office or other law enforcement authority is involved, final report submission or release shall be cleared with the appropriate office or authority.

c. Submission of Internal TDHR Reports

°Within three calendar days of completion of the joint investigation, TDHR Child Protective Services staff shall notify Agency and Institutional Licensing staff in writing of their findings regarding whether child abuse or neglect was confirmed. Upon request, Agency and Institutional Licensing staff must make available to Child Protective Services staff the report of their findings concerning compliance with minimum licensing standards.

5. Follow-up Reports

a. Requests for Additional or Clarifying Information

°TDHR or OYCI may request in writing additional or clarifying information concerning any report of an institutional child abuse or neglect investigation it receives from another agency.

°Requests for additional or clarifying information must be in writing and be made as soon as possible after the receipt of the status or final report.

b. Notification of Complainant

°Complainants have the right to be informed of the findings of the investigation.

6. Confidentiality

°The name of the complainant must be confidential and must be released only if ordered by the court or requested by law enforcement (TFC: Chap. 34).

°The names of children involved in an abuse or neglect investigation must be confidential and must be released only if ordered by the court or requested by law enforcement.

B. INVESTIGATIVE TEAM COMPOSITION

1. Investigations Conducted by TDHR

a. Authority

°TDHR must investigate alleged child abuse or neglect in:
Agency Foster Family and Foster Group Homes
Independent Foster Homes
Independent Foster Group Homes
Institutions Providing Basic Child Care
Therapeutic Camps
Institutions Serving the Mentally Retarded
Residential Treatment Centers
Halfway Houses
Emergency Shelters

b. Designation of Staff

°Each region must designate staff in Child Protective Services and Agency and Institutional Licensing to have the primary responsibility for responding to institutional child abuse and neglect reports in the facilities listed above. These individuals must not have on-going responsibilities for licensing or otherwise monitoring these institutions. Exceptions to this policy must be approved by the RDFC or supervisory licensing personnel as appropriate.

°Investigations must be conducted jointly by the CPS and Agency and Institutional Licensing staff.

°Each region must designate Child Protective Services staff to investigate reports of abuse/neglect in DHR foster family homes and foster group homes. The staff assigned to conduct these investigations must not be involved with the foster home (i.e. must not have foster children currently in placement in the home; or must not be responsible for regulating the home). Exceptions to this policy must be approved by the RDFC.

2. Investigations Conducted by Other State Agencies

a. Authority

°The agencies listed below have the authority and responsibility to investigate institutional child abuse and neglect reports in the types of institutional facilities designated on page 5, "Institutional Child

Abuse Investigations - Agency Roles and Regulations"):

(1) Texas Department of Mental Health and Mental Retardation
(2) Texas Department of Health
(3) Texas Youth Commission
(4) County Juvenile Boards/Courts
(5) The Office of Youth Care Investigation

b. Participation of TDHR

°TDHR Child Protective Services staff must participate in investigations in these institutional facilities upon request made by one of the following:

-an agency administrator;
-the OYCI;
-the Texas Attorney General's Office; or
-other state or local officials.

C. INVESTIGATION PROCEDURES

1. Time Frames for Investigations

°When there is a report of alleged child abuse or neglect in a 24-hour care facility, an investigation must be initiated within 24 hours or the next working day.

(See "Reporting of Institutional Abuse and Neglect" for time frames and information to be included in interim and final reports.)

2. Investigation Process Guidelines

°An investigation of institutional child abuse or neglect must include the following elements when warranted:

a. A visit to the facility in which the child was residing at the time of the alleged abuse and/or neglect or other harm.

b. A face-to-face interview or contact with the alleged victim
   -obtain the alleged victim's explanation of the abuse or neglect unless the victim is too young or handicapped
   -examine the victim for signs of abuse or neglect
   -obtain the names of collaterals who can verify the victim's explanation of the alleged abuse or neglect

c. Documentation of any signs of abuse or neglect
   - -photographs (preferably in color)
   - -medical reports (if appropriate)
   - -psychological examination
   - -descriptive factual case recording of what the investigator's observations
   - -autopsy report
   - -name(s) and condition(s) of the other child(ren) in the facility

d. Interview with the alleged perpetrator
   - -obtain an explanation of the alleged victim's role in the allegation
   - -obtain and document the names of collaterals who can verify the explanation given by the alleged perpetrator

e. Interview with others having knowledge of the alleged abuse or neglect
   - -obtain collateral's explanation of the alleged victim's situation in relation to the allegation and the perceived role of the alleged perpetrator

f. Review of pertinent records
   - -alleged victim's case records
   - -record of alleged perpetrator if an employee or volunteer at the facility
   - -other relevant records(e.g. personnel, log notes, etc.)
   - -alleged victim's school record
   - -records of other children or staff having knowledge of the alleged abuse or neglect
   - -other facility records (e.g. logs, training records)

IV. STAFF TRAINING

A. INVESTIGATIVE STAFF

°All staff with responsibilities for conducting institutional abuse and neglect investigations must have training which includes, but is not limited to the following:

-state law concerning child abuse and neglect (Texas Family Code, Human Resources Code, Texas Penal Code);
-agency rules and regulations relating to investigation of alleged child abuse and neglect;
-recognizing institutional abuse and neglect (definition, indicators, etc.); and
-investigative techniques.

B. INSTITUTIONAL STAFF

°The institutional facility must provide mandatory continuous and regular pre-service and in-service training on child abuse and neglect which includes training for staff in supervisory positions and for all personnel who are in day-to-day contact with the children.

°The institutional staff training program must include training on the prevention, identification and treatment of child abuse and neglect and reporting requirements:

-state law and reporting requirements (Texas Family Code, Human Resources Code, Texas Penal Code, Applicable Agency Rules and Regulations);
-institutional abuse and neglect definitions and indicators;
-appropriate behavior modification and other treatment procedures and techniques; and
-institutional policies and procedures on reporting, investigating, and remediating child abuse and neglect.

V. MAINTENANCE AND SHARING OF INFORMATION/STATISTICS ON INSTITUTIONAL ABUSE/NEGLECT

A. AGENCY STATISTICS

°Agencies investigating institutional abuse and neglect must compile and maintain statistics and information regarding the reporting and incidence of child abuse and neglect in 24-hour care facilities.

"Statistics and information" is defined as:

- -number of reports received;
- -nature of the abuse or neglect alleged,
- -type of 24-hour care facility involved (e.g. nursing home, residential treatment center);
- -role of the alleged perpetrator (e.g. child care worker, nurse),
- -findings of the investigation (e.g. confirmed, uncertain, adjudicated); and
- -disposition (e.g. staff fired or transferred, agency policy changed, etc.).

B. OYCI STATISTICS

°The Office of Youth Care Investigation shall compile, maintain, and make available statewide statistics and information regarding the reporting and incidence of institutional child abuse and neglect in Texas.

APPENDIX 6-F

Research Design
for CAIIS Pilot Test

CAIIS PILOT TEST - RESEARCH DESIGN

Task 1: Prepare for pilot test implementation (September, 1983 - November 1983)

a. collect initial data

(1) prepare and distribute reporting form
(2) devise data collection/tabulation format

b. prepare pilot test briefing materials

(1) background materials
(2) model guidelines
(3) training material

c. conduct necessary staff training sessions

(1) agency investigations
(2) facility/institutional staff

Task 2: Implement pilot test (December, 1983 - May, 1984)

a. monitor interim test results

(1) develop sampling/monitoring format
(2) distribute format

b. collect and analyze pilot test results and data

(1) collect statistical results
(2) conduct interviews with TDHR and other agency staff

c. modify pilot test procedures and/or model elements (if necessary)

(1) devise new reporting format (if necessary)
(2) collect revised statistics

Task 3: Analyze pilot test results (June, 1984 - August, 1984)

a. review initial, interim and final data

(1) tabulate statistics
(2) develop summary report

b. interview DHR regional and other agency staff

Task 4: Revise Model for Investigations

a. develop a draft final model for investigations

b. advisory committee review

Task 5: Project Dissemination

a. prepare plan to disseminate project results

b. develop final report appropriate for dissemination to other states and interested parties

c. prepare briefing materials and presentations of CAIIS project results

Task 6: Develop Recommendations for Statutory and Regulatory Revisions

a. prepare recommendations for legislative changes

b. prepare recommendations for rule and policy changes

c. include recommendations in final report draft

A timetable for completion of second year project tasks follows.

7

Waco Center for Youth Liaison

YEARLY EVALUATION REPORT

EXECUTIVE SUMMARY

The Waco Center for Youth (WCY) Liaison Project was designed to improve services to emotionally and behaviorally disturbed children in the managing conservatorship of the Texas Department of Human Resources (DHR). The liaison worker assisted in establishing a good working relationship between DHR's field staff and WCY staff. She facilitated the availability of WCY services to DHR field staff members seeking placement for DHR conservatorship children who needed residential treatment. The liaison worker also arranged supporting services for DHR children in WCY, and she coordinated permanent planning and aftercare services for them. During this project year there were 85 applications for admissions, 34 children accepted for treatment, and 20 discharged.

BACKGROUND

The WCY Liaison Project was designed to improve services to emotionally and behaviorally disturbed children in DHR's managing conservatorship. The services are provided at WCY in Waco, Texas, the first state-operated residential treatment center. The client population consists of children who can benefit from residential treatment services other than inpatient hospital care or outpatient mental health services. The WCY is a joint endeavor of DHR and the Texas Department of Mental Health and Mental Retardation (MHMR).

The WCY Liaison Project sponsors a DHR liaison worker, whose office is located at the facility. The worker acts as a liaison between DHR and MHMR and between DHR field staff, who place children needing residential treatment, and WCY staff, who provide the necessary treatment. The project's full-time liaison worker carries out both direct service delivery and administrative functions in order to meet established project objectives. (The activities and tasks of the project staff will be discussed by objective in the subsection on results).

Goals

The goals for the third year were in three general areas.

- o Facilitate availability of WCY services to DHR field staff seeking placement for DHR conservatorship children needing residential treatment.

- o Assure maintenance of certain services supporting residential treatment at WCY for DHR conservatorship children.

- o Coordinate permanent planning and aftercare planning services for DHR conservatorship children placed in WCY.

Activities

To achieve these goals, nine objectives were identified.

- o Receive, review, and present DHR referrals to the WCY admissions committee and make formal recommendations to the WCY director.

- o Provide current information to DHR regional staff members regarding WCY policies, procedures, and programs.

- o File mental health recommitment applications for DHR children in placement at WCY.

- o Represent DHR regional interests by coordinating WCY progress reports.

- o Advocate for children in DHR conservatorship while they are in placement at WCY.

- o Develop a permanent plan for every child in DHR conservatorship at the point of entry into WCY.

- o Facilitate aftercare/permanent planning by providing consultation and information on alternate placement resources.

- o Negotiate for follow-up services, represent children's interests, and communicate their needs to WCY's administration.

- o Begin development of an instrument to evaluate treatment results.

PURPOSES OF THE EVALUATION

Because the impact of this project is expected to continue beyond the project time frame, the evaluation focused on examining the activities of the project and determining the extent to which project objectives were met. The major purposes of the evaluation were--

- o to determine the extent to which project objectives were met within the time frame established by the project;
- o to provide summary data and information on project activities; and
- o to prepare a report of the findings for the National Center on Child Abuse and Neglect (part of the Department of Health and Human Services' Office of Human Development Services) and for DHR's Protective Services for Children Branch.

A discussion follows regarding the extent to which each project objective has been met.

RESULTS/STATUS OF OBJECTIVES

Objective 1: receive, review, and present DHR referrals to the WCY admissions committee and make formal recommendations to the WCY director. The project director received 85 referrals from DHR's field staff during this project year. Regional DHR staff members continue occasionally to apply to several institutions for admission of the same child in order to obtain the quickest possible placement and to offset the possibility of an institution rejecting the application. A concerted effort was made this year to shorten and simplify the admission process at WCY, in an effort to reduce the time required to process an application and reduce the withdrawal rate. However, table 7-1 shows that withdrawals were 37.5 percent (32). Table 7-1 also reveals that of the 85 referrals received, 11.7 percent (10) were rejected, 40 percent (34) were admitted, and 10.8 percent (9) were pending approval.

TABLE 7-1
Applications Submitted for Approval

Application Status	Number
Withdrawn	32
Rejected	10
Approved (child admitted)	34
Pending	9
Total	85

Objective 2: Provide current information to DHR regional staff members regarding WCY policies, procedures, and programs. The project director undertook a series of activities to provide DHR regional staff members with information on WCY policies and procedures. These activities included preparing and disseminating written materials, holding group meetings with regional institutional representatives, and contacting individual DHR workers. Toward the end of the project year, a meeting between DHR regional institutional representatives and a psychiatrist from WCY was arranged by the project director.

Ongoing contact and liaison is necessary because, for example, DHR staff members may know procedures and policies of WCY but may question whether they are appropriate for a particular child. Likewise the WCY staff may have difficulty comprehending DHR policies and procedures and their impact on the treatment plan for a particular child. The visits also serve to increase understanding and communication among the various people serving the children.

Objective 3: file mental health commitment applications for DHR children in placement at WCY. During this project year, the project director filed and received approval for nine recommitments. She was also involved in seven voluntary commitments. Fewer commitment applications were filed this year than in previous years due to the center's new policy of admitting children on a voluntary basis, not just on a mental health commitment. Each commitment process requires a great deal of work with the child, the parents, the caseworker, the WCY staff, attorneys, and a district or county judge.

Objective 4: represent DHR regional interests by coordinating WCY progress reports. The project director served as liaison between WCY and DHR for reports going to DHR staff members concerning children in WCY. This year, 92 reports were sent to various DHR personnel.

TABLE 7-2
Reports Sent to DHR Staff

Type of Report	Number of Reports
Comprehensive staffing report	8
Psychiatric report	44
Psychological report	22
Social history	16
Dental report	2
Total	92

Table 7-2 reveals that a total of 92 reports were sent, almost half of which were psychiatric reports. Extensive planning has been under way to increase communication between DHR and MHMR through routine written reports and monthly visits or telephone conferences.

Objective 5: advocate for children in DHR conservatorship while they are in placement at WCY. The project director undertook the following activities to meet this objective:

- o arranged for children in DHR conservatorship to receive monthly allowances,
- o arranged for children to get adequate clothing,
- o arranged for a child's caseworker to visit the child regularly,
- o served as advocate for children who were runaways,
- o served as advocate at preplacement conferences, and
- o reported cases of sexual abuse to DHR.

Objective 6: develop a permanent plan for every child in DHR conservatorship at the point of entry into WCY. The project director reports that at intake a permanent plan was developed for each child in DHR conservatorship admitted to WCY. In each instance the DHR caseworker and the project director kept a copy of the plan, and the information was shared with the treatment plan leader.

Objective 7: facilitate aftercare/permanent planning by providing consultation and alternate placement resources. As discussed previously, the project director has a twofold liaison role: to provide information about the WCY program to community placement resources and to inform the WCY staff about the strengths and limitations of those resources. This exchange of information helps the WCY staff know what community-based services are available to a child who is ready to leave WCY. Additionally, the DHR liaison worker was involved with the DHR caseworker and WCY staff members in aftercare placement for several children leaving the center.

During this past year, 20 children in DHR conservatorship were discharged from WCY. Table 7-3 reveals that 40 percent were discharges for children whose treatment was considered successful by the WCY staff, and 60 percent were for children whose treatment was considered unsuccessful.

TABLE 7-3
Discharges

Type of Discharge	Number of Discharges
Successful	8
Unsuccessful	12
Total	20

Table 7-4 shows that 30 percent of the children discharged went to less restrictive group homes, 30 percent returned to the homes of their parents or relatives, 10 percent went to a mental hospital, 15 percent to an emergency shelter, 5 percent to the Texas Youth Council, and 10 percent to other types of facilities. These include runaways, children released by the court, and those not committable who requested discharge.

Objective 8: negotiate for follow-up services, represent children's interests, and communicate their needs to WCY's administration. The project director has developed a good working relationship with WCY in the area of follow-up services. Often it is very difficult to find a facility willing to accept a child who has been at WCY. On several occasions this year, WCY has provided funds to help pay for aftercare placement costs when no other funds were available.

Objective 9: begin development of an instrument to evaluate treatment results. Time constraints and the fact that the project director is newly hired prevented activity on this objective.

TABLE 7-4
Type of Facility to Which Children Transferred

Type of Facility	Number of Children
Less restrictive group home	6
Parents' or relatives' house	6
Emergency shelter	3
Mental hospital	2
Texas Youth Council	1
Other	2
Total	20

LIMITATIONS

The primary limitation of this evaluation is that it addresses only the processes of the project. The long-range impact of project activities on WCY children can only be determined after a longer period of time has elapsed and therefore is not appropriate for the present evaluation.